

Title: The Effects of Father's Employment Induced Absence on Family
Function Where a Child is Referred to Psychiatric Services for Challenging
Behaviour

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Declaration:

This thesis has been composed by and is entirely the work of the candidate.
Furthermore the work has not been submitted for any other degree or
qualification

Signed: _

Acknowledgements

I would like to express my appreciation to my wife for her interminable patience, my children for their unquestioning tolerance and my parents for their unwavering support. Thank you all.

Abstract

Family functioning was measured and compared between two groups of families attending Child and Adolescent Psychiatric Services. One group consisted of families in which father was compelled to be absent from the home for periods because of his occupation and the other represented families where he was not required to be absent. The divorce literature would suggest that father's prolonged absence would increase strain on the remaining partner and lead to less cohesive family function resulting in higher levels of distress in the child. Using the Family Assessment device and the Marital Adjustment Scale, it was established that the families where father worked away for periods appeared to have lower levels of dysfunction in areas including marital satisfaction, role definition and overall family function. Both partners in the away group appeared to have more secure attachment styles which supported a higher level of independence and self esteem, although there was evidence that fathers were less integrated into the family structure. It would appear that in the away group, father's success in his role as breadwinner was significant in the success of the marital dyad for both partners but not simply as a function of increased income. The heightened role clarity in this group appeared to meet the needs of both partners despite the absence it creates. It was unclear from the data whether the alternative structure had gradually developed through systemic process or had been instigated initially as a chosen structure, although in most cases the arrangements pre dated or coincided with marriage.

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1 Introduction

1.1 The family in society

There is much debate in both the political and social arenas about the family, its shape and its function in society (Muncie 1999; Steel & Kidd 2001). The political thrust across all ideologies appears to be toward the maintenance of the family as the core of society; continuing family bonds as a source of support and retaining a positive environment to ensure a stable structure for the nurturing of the next generation (Silva & Smart 1999). The current impetus appears to be a reaction to a number of changes in family composition. Historians would have us believe that the first significant shift came in the post-industrial period and was a move away from the *extended family* (a family unit involving multiple generations and kin beyond the children and birth parents) toward the *nuclear family* consisting of mother, father and child(ren) (Steel & Kidd 2001).

This late nineteenth and early twentieth century shift is attributed to a number of circumstances including an increase in individual wealth (Muncie 1999) alongside the increasing practice of working outwith the home i.e. the family unit was no longer the unit of production through their endeavor on the land (Gittins 1985). Instead the factory had become the unit of production to which individual's sold their labour. Numbers were no longer required to produce the food the family would consume since the money to purchase their needs became increasingly available; in fact as the means to produce became increasingly distant, it was in the family's best interest to become smaller (Giddens 1997).

The second major shift in the composition of the family came late in the twentieth century. While some 75 per cent of all households still contain nuclear families (Barnes, Willitts,

Anderson, Chaplin & Collins 2004), a whole range of alternative family structures appear to have developed and flourished all of which have been seen as a challenge to the integrity of the family in society (Steel & Kidd 2001; Taanila, Laitnen, Moilanen & Jarvelin 2002). There has been an increase in entities such as the single parent family (either the result of divorce or where parents have never co-habited), the reconstituted family (where family units are formed from other dismantled families) and same sex families (either male or female) (Silva & Smart 1999).

This picture of the 'golden age' of the family however, has subsequently received significant challenge. (Giddens 1997). Writers such as Bernardes (1997) have argued that what has become known as the extended family is somewhat of a myth, which may have been experienced for short periods by some families, but only by a few and only for short periods. In previous generations, high mortality rates meant that the majority of children never even knew their grandparents. Similarly, high rates of maternal death related to childbirth meant that even the traditional view of mother, father and children was much less common than some would have us believe (Gittins 1985).

Nevertheless, the idea of the disintegration of the family and the subsequent loss of moral fibre has become entrenched in modern western culture (Muncie 1999). In particular the idea of the nuclear family has become heralded as the societal norm and while this is a description of a family structure, it carries a whole range of connotations, not to mention values, which have become equally as enshrined in western culture (Bernardes 1997). The term suggests clearly identified roles for mother and father as nurturer and breadwinner respectively (Muncie 1999). This has become known as the 'traditional family', indicating both traditional functions and structures. (Steele & Kidd 2001)

1.2 Work and the family

1.2.1 Mothers' employment

The late twentieth century saw further evolution of this traditional structure. Perhaps most obvious has been the change in employment patterns. Although women had previously entered the work force, traditionally they gave up work on entering marriage or at latest after childbirth. Indeed even in the late 1950's, only 8 per cent of women returned to work within one year of childbirth while in 1990, some 55 per cent returned within the first year (French 1997). The mid to late 1970's saw rocketing unemployment, with those jobs which were available being part time, often menial with poor wages; "woman's work" and perhaps unworthy of many men (Jackson 1987). Service sector jobs fit well with the culturally accepted role of the female as more emotionally and socially connected, while repelling many men because of the job's perceived lower status.

Although still far short of equivalent male rates, women's wages are now somewhere in the region of 82 per cent of men's compared to 62 per cent in 1970 (Bishop 2003) and while the majority of married mothers work in part time jobs, the contribution to family income has rocketed. This change in pattern has had a significant effect on the traditional roles in the family; in 1960, almost 80 per cent of families would have fitted the 'traditional model' in terms of finance, however by 1997, in some 44 per cent of U.K. homes, women were earning at least half of the household income (Silva & Smart 1999) while in America this figure runs to 58 per cent (Gottfried, Gottfried & Killian 1999)

This increase has had a number of sequelae for family life. For example women's growing interest in careers, and the independence this affords, means they are choosing to marry and have children later, if at all (Silva & Smart 1999). Alongside the obvious threat to male dominance, it is seen as destabilising the family's role as an environment for the

optimal development of the child (Jackson 1987). Mother's absence through employment came to be seen as neglectful of the child (and the woman's role) (Gottfried, Gottfried & Killian 1999). By definition, the more time either parent spends at work, the less time they are available to spend with their family. Increased numbers of *dual earner* families has sparked considerable debate about the effect of absence of both parents and the subsequent family functioning. The belief that mother's absence from the home has a negative effect on children's development became a strong message (Silverstein & Auerbach 1999) however this myth appears to have developed in the face of little valid evidence (Eirini & Buchanan 2003).

Indeed Gottfried et al (1999) have demonstrated in a broad base longitudinal study that far from being damaging, maternal employment outwith the home can, in some cases, have significant positive effects including higher educational aspiration and attainment. Furthermore, despite their absence these mothers spent no less time engaged in activities such as reading or eating with their children than their 'housewife' peers and in fact the quality and duration of this mother-child interaction was positively correlated with mother's job satisfaction.

1.2.2 Fathers' employment

Father's employment is widely reported as having a direct effect on their involvement with their children (Anju, Belsky & Crnic 1996). The most immediate effect is that fathers who are at their place of work cannot interact with their children, therefore the longer hours they work the less involvement they have. Indeed a number of studies have demonstrated that the fathers who are most involved with their children are those who are unemployed or are retired (Aldous, Mulligan & Bjarnason 1998); National Institute of Child Health and

Human Development 2000). Within the group of fathers who do work outside the home, there are equivocal findings about the type of job involved. Dubas & Gerris (2002) have suggested that high status high responsibility jobs tend to have a negative effect on father's involvement because these fathers tend to spend longer on the job leaving less time available for family. Alongside physical absence, it has been suggested that extended periods of work related stress can lead to an emotional withdrawal from the family, with both positive and negative interactions with the children reducing (Walker & McGraw 2000).

Anju (1996) by contrast suggests that individuals who have high stress jobs with considerable autonomy and job satisfaction are often highly involved with their families (Grossman, Pollack & Golding 1988). This appears to fit with several other studies that have found involvement has a positive correlation with level of education (assuming education and job status have some correlation) (Levy-Schiff & Israelashvili 1988). While Grimm-Thomas & Perry-Jenkins 1994 have suggested that satisfaction leads to increased self esteem and an increased sense of control which encourages positive interaction with the family. Woodworth, Belsky & Crnic (1996) found that increased economic resources alongside greater occupational challenge led to lower levels of coercive parenting and a more 'harmonious' father-child dyad.

Interestingly however, both Aldous, Mulligan & Bjarnason (1998) and Walker & McGraw (2000) found that subsequent involvement was related to early involvement, suggesting perhaps some intrinsically rewarding aspect of interaction with their children. This could further compound difficulties when, as suggested by (Burghes, Clark & Cronin 1997), fathers often have to increase their working hours in the initial stages of family life to

compensate for mothers lost income. Furthermore, Eirini & Buchanan (2003) suggests that this early increase in working hours, alongside mother's intense period of childcare may lead to an even greater differential in perceived skill/competence levels, eroding further father's ability to engage in childcare. Finally, Grimm-Thomas & Perry-Jenkins (1994) have suggested that involvement in the home is directly related to job satisfaction rather than status or income. What is less clear however is an explanation of what drives individuals to relate and accommodate in these ways.

1.2.3 The division of labour within the household

Mother's employment also appears to have some impact on the father's role within the family, with hours worked having an inverse relationship with paternal childcare activity; mother's absence has the appearance of creating an imperative to which fathers respond favourably (McBride, Schoppe & Rane 2002). Gottfried et al (1999) suggest that a shift in the position of men has allowed the equilibrium to maintain in these dual earner families. This process of balancing spouses' contributions has become known as *Human Capital Theory* (Aldous et al, 1998; Anju et al 1996). The theory suggests that each partner brings their own set of resources to the family. Traditionally, those resources are domestic skills from the woman and financial from the man (Eirini & Buchanan 2003). However as the woman increases the financial resource she contributes, so the man accommodates by increasing his contribution to domestic duties (*figure1*). In response to mothers decreased availability for child care duties, it appears that men move to take up the slack in the child rearing tasks (McBride et al 2002); although the overshadowing message is that fathers still spend substantially less time engaged in these duties than do their wives, even when both spend similar amounts of time in the work place.

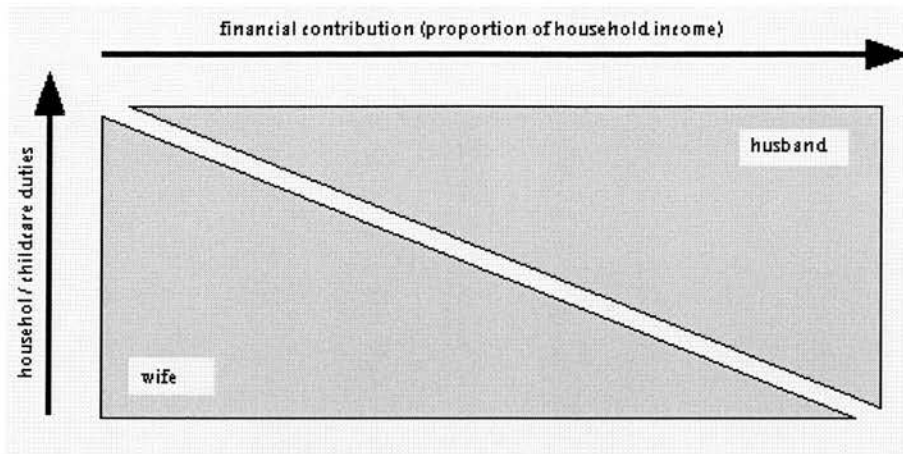


Figure 1 Human Capital Theory: the relationship between relative financial resource and household duties.

Lamb (1999) has demonstrated that in those families where father works full time hours and mother is unemployed (the traditional family) mothers spend around four times as much time engaged with their children whereas in dual earner households with equivalent amounts of time employed out with the house, mothers still spend around twice as much time engaged in childcare activities. He also noted that father's availability (accessibility to meet their needs when required) for the children increases from a ratio of 1:3 with mothers to 1:2, however he found that fathers took no responsibility for children's more general needs such as doctor and dentist appointments in either circumstance. Gottfried et al (1999) however, found that the increase in activity from fathers was almost exclusively related to childcare activities and did not extend to general household chores.

Unfortunately, however, there is little longitudinal research to support the idea of shifting resources over time, the majority of data being cross-sectional. Differences in maternal and paternal activity may be the result of individual characteristics influencing men's activities. Furthermore the direction of causality is not clear; mothers may be able to spend more time outside the house because fathers have increased their childcare activities.

Perhaps most significant is the lack of description of how these processes operate within the marital dyad.

1.3 Family functioning

Each of these 'non-traditional' or 'traditional' families may have a different composition and even a different social status, however they all have one thing in common; they are made up of individuals who consider themselves a family unit (Carr 2001a). A group who has some common bond that maintains them as a discreet unit; separate from but connected to the rest of their social context. Although made up of individuals, the family is more than simply the sum of its parts. As Frunde (1991) and others have suggested the family unit has "emergent properties" which are different from the individuals but contributed to by them all (Jones 1993; Belsky & Pensky 1988; Carter & McGoldrick 1989). The metaphor of the family as an organism is often used to characterise its having a life of its own with internal "systems" and "structures" which allow it to function (Bloch, Hafner, Hawari & Szmukler 1994). It has needs like any other organism and it exists as part of, interacts with, but is distinct from its environment.

The metaphor is often further extended to suggest that the family has a *lifecycle*. In the way that Erikson (1968) and others charted the development of the individual, there have been several attempts to chart this *family lifecycle*. That is to say that the family passes through a predictable series of stages and transitions in which some or all are involved. Throughout the cycle, the family unit will accommodate the lifecycle of the individuals although the overall experience will not mirror any one individual's experience exactly. There will be entrances into and exits from the unit, through birth and death accordingly alongside changes in roles for the individuals.

Table 1 Carter & McGoldrick's (1989) stage model of the family lifecycle

Stage	Description	Transition Processes
Stage 1	Leaving home	Accepting respect for self (emotional and financial)
Stage 2	Finding a partner	Committing to a new system
Stage 3	Families and young children	Accepting new members
Stage 4	Families and adolescents	Shifting boundaries: Children's independence; grandparent frailty
Stage 5	Launching children	Accepting exits
Stage 6	Families in late life	Accommodating new roles without children; accepting grandchildren

Attempts to chart this cycle (Bloch et al 1994) have included anything from four to twenty two stages, however the one which has emerged as the most popular (Carr 2001) is that developed by Carter & McGoldrick (1989). This consists of six stages, beginning with the individual's attempt to individuate from the family. The stages are described in *table 1* and each has a description of the processes involved and the significant transitions involved.

The stages are linked to the development of the family members rather than time or age. Progression through the lifecycle is predominantly linear and progressive. Carter & McGoldrick (1989) stress the importance of the transitions as a source of stress for the family unit as it comes to terms with the new demands of each stage and the members adapt to the new roles, structures and means of communicating. Alongside these internal predictable stressors, two other categories of stressor have been identified for the family. Firstly are the environmental pressures of events which are likely to be outwith the family's control and to which the family must adjust in order to survive (instrumental pressures). These could include father's redundancy or the shifts in working patterns

which have brought women into the workforce and out of the home. The final category of events is unpredictable internal events such as illness within the family (crisis or hazardous pressures) (Epstein, Baldwin & Bishop 1983).

While this type of stage model affords a helpful description of the development of the family, it is less clear how the family accommodates the cultural changes that new generations bring. For example, the increasing rates of divorce means the family may experience a significant split at any point during this development, while the reconstituted families which often emerged when partners re-marry begin the cycle in a very different way to that described in the model.

Implicit in the linear nature of the model is a degree of competence at each stage before the family can move on to the next, however it says little about what those competences are and how they might be achieved.

The family unit therefore is faced with a range of stressors, predictable and unpredictable, which place demands on the integrity of the family unit as its individual members strive to accommodate the new circumstances and assimilate the new roles and expectations: all of this within a socio-cultural context which makes demands such as the gender role stereotypes of the 'traditional family'. Yet many families appear to be able to accommodate these challenges and continue functioning in what appears to be a cohesive and adaptive manner (Silverstein & Auerbach 1999). Parents develop and mature, while children grow up and go on to have families of their own.

1.4 Family Therapy

During the late 1950's writers such as Ackerman (1958), Bell (1962) and Midlefort (1957) began to theorise more explicitly the role of the family in the development, maintenance and perhaps more importantly the amelioration of individual difficulties. Barker (1992) describes how other sciences of the time similarly switched from an increasingly reductionist view of the world to a more "ecologically" aware perception of the interrelatedness of systems in which the minutia was significant, but only in the way it related to the bigger picture.

Ackerman (1958) and others began to embrace this new complexity, in recognition that to study the individual's symptoms or cognitions was to miss the richness of the context within which they developed, or as Salvador Minuchin (1974) described in his seminal work *Families and Family Therapy*:

"A therapist working in the [individual] framework can be compared to a technician using a magnifying glass. The details in the field are clear, but the field is severely circumscribed"

There are many forms of therapy which would include themselves under this rubric and while their methods may be wide and varied, they do generally make a number of common assumptions. In particular they assume that the experience of any of the individuals within a family is contributed to by being part of the family (Carr 2000a). More particularly, the workings and functions of the family group have an effect on the experience and development of the individuals who make up that group. There is a recognition that the converse is also true, i.e. that the experience and behaviour of the individual members of the group will contribute to and shape the way in which the group functions (Epstein et al 1983). The group considered as a whole therefore is more than simply the sum of the experiences and behaviours of its members. While it is likely that the initial pattern of

relating within the family will be based around the way in which 'new couple' interact, which will in turn be a reflection of their own early history (Davilla & Bradbury 2003).

Perhaps the first issue is what constitutes the "well functioning family" and how this is indexed. Generally the accepted answer is one which considers itself well functioning, or more precisely one in which all the individual members consider the family well functioning (Frunde 1991; Bloch et al 1994; Lamb 1999). Clearly if all members are *genuinely* satisfied with their place in the family, with perhaps the exception of periods of transient conflict around the negotiation of individual needs, the family is meeting their developmental needs and is therefore well functioning. Once again, researchers from the field of family therapy have sought to describe the processes and functions which may allow a family to fulfill all of these requirements and thus allow the individual to develop successfully (Cox & Paley 2003).

1.4.1 Theoretical perspectives of the family

It has become generally accepted, that there are some family processes which contribute to both individual satisfaction and to family functioning and therefore outcome (Barker1992; Olsen 2002; Miller, Ryan, Keitner, Bishop & Epstein 2000). This is of particular use in the clinical setting. A recognition and description of these functions or patterns has allowed clinicians from many orientations to think in more ordered and objective ways about how families express difficulties. While the majority of clinicians within the child and adolescent field do not necessarily engage rigorously in the practice of family therapy, it is clear that the problems of a referred child are inevitably embedded in a family context (Carr 2001a). It is after all rare that we would see a child self refer; more common is the

referral coming from a parent because of the impact of the child's difficulties on the family (Jones 1993).

There are a number of criteria which have been proposed for optimal functioning:

Clear role definition (Pasley, Futris & Skinner 2002; Taanila et al 2002): Roles within the family should be clearly defined and obvious to all members, reducing confusion. There should be some relationship between these roles and individuals' strengths and personality such that individuals can gain some positive recognition or enhanced self esteem from fulfilling the role. Family members may have multiple roles depending on task or setting, it is therefore important that there is some degree of mutual agreement about roles. Nock (1988) has highlighted the importance of parents maintaining an 'executive role' which brings its own responsibilities; in particular some sensitivity to the needs of the others.

Family Rules (Carr 2001a): Rules may be explicit or implicit but must be clear and applied consistently across both time and family members. Clear consequences for rule breaking are important allowing openly fair application. Rules are an integral part of conflict resolution therefore consistency affords a sense of justice and individual worth.

These two are the structures which allow the family to communicate and relate openly. Teja (1995) found significantly lower levels of behaviour control in families where children were referred to psychiatric services for behaviour problems, while Akister & Stevenson-Hinde (1991) found that mothers in particular reported lower levels of role definition in families of children at risk of psychiatric disorder.

Relationships: These should be based on warmth and mutual respect. Such relationships are characterised by a balance between closeness and independence (Carr 2001b) or as described by Frude (1991) a *semi-permeable membrane*. At the poles of this closeness/distance continuum are what has been described as *enmeshment* (Carr 2001b), which would be described as over involvement and over-reliance on each other stifling the development of independence (both for the children and the parents as they begin to move into stage 4 and 5 of the family cycle). In such circumstances, relationships may cease to be age appropriate, leading to possible erosion of the 'executive role' and the power hierarchy to alter (Nock 1988).

The opposite pole would be *disengagement*, characterised by the behaviour of one member having little or no effect on the others in the family (Baker 1992; Schock, Gavazzi, Fristad & Goldberg-Arnold 2002). Manifesting as detachment and lack of warmth or affection, these relationships are likely to discourage attempts at open communication or expressions of affection. Moving beyond the dyad, this criteria also includes the wider patterns of relationships; are there co-allitions in which two or more members of the family form a 'partnership' against other members (Frude 1991) or if this pattern is consistent, does *scapegoating* occur in which one member is consistently blamed. This can lead to individual members taking on the role of scapegoat which can in turn lead to their alienation or detachment.

Tambling, Goodyer and Herbert (1998) and Stein et al (2000) found that families in which a child was experiencing depression were relatively weak in this area as were the families of children who self harmed (Harrington, Kerfoot, Dyer, McNiven, Gill, Harrington & Woodham 2000). Farrell and Barnes (2000) found that outcomes for child behaviour and

mental health were positively related to family cohesion (maintaining relationships) as did McFarlane, Bellissimo & Norman (1995). Linker, Stolberg & Green (1999) also found that in post-divorce families, levels of cohesion were negatively correlated to children's levels of adjustment and behaviour.

Communication: In the way that both *roles* and *rules* work best when explicit and consistent, communication is at it's best when clear and unambiguous and when content is accompanied by the relevant emotion (congruent) (Martin & Martin 2000). Conflict and the expression of high emotion is acceptable, even inevitable in a context of constant change and diverse needs, however as Bloch et al (1994) suggest, "the family which fight well and cleanly" will be able to accommodate and even develop from conflict. Indeed within a family who cannot tolerate the expression of conflict or strong emotion, it is likely that there is no means of processing or resolving differences which then become unspoken areas of the landscape to be avoided, further restricting communications.

Perhaps the best example of the role of communication comes from the vast literature on expressed emotion (EE) which refers to the level and valence of interactions within the family (Bentsen, Boye, Munkvold & Notland 1996). There are two independent components; critical or supportive comments and emotional over involvement. Originally based on work with schizophrenic individuals and their families, where it was found that higher levels of EE coincided with higher relapse rates in the patients, work has been extended to cover other conditions and younger age groups (Kershner, Cohen & Coyne 1996). Within the child population high levels of critical comments have been connected to increases in externalizing behaviour (Nelson 2003) and emotional over involvement has been related to anxiety disorders (Bensten et al 1996). Kershner et al (1996) found that

levels of EE were significantly higher in families referred to Child and Adolescent Mental health Services than controls.

What is less clear however is the direction of causality. While early work suggested that high EE was a major cause of distress, Peris & Hinshaw (2003) has proposed that on the contrary, the presence of some child conditions (such as ADHD) could be sufficient to create high EE. Raune, Kuipers & Bebbington (2004) have pointed out however, that EE is only part of a wider system and is insufficient alone to explain outcome. An understanding of the system as a whole is vital in understanding the role of communication.

Flexibility and Facing Challenges: The family unit will, during its life cycle be faced with many challenges, some of which are described above. The well functioning family will face these challenges in a coherent and flexible fashion (Carr 1995). It is able to draw on its resources (the family members) comfortably. Solutions will be based on experience, however it is important that what Byang-Hall (1988) called “family scripts” do not become rigid i.e. the family have a flexible approach using past experience as a guide not a template to problem solving. Indeed flexibility is important in all of the areas mentioned above, particularly in times of transition. The well functioning family can negotiate roles and rules accordingly as children develop and circumstances change (Epstein et al 1983).

Interaction with the environment: Alongside drawing on internal resources, the well functioning family has a means to draw on external ones (Carr 1995). Maintaining effective links with extended family, peers and other external organizations such as church,

school and work (Bloch et al 1994). These resources will allow the family to deal in a more flexible manner with ongoing challenges.

These last two criteria correspond to Olsen's *adaptability* dimension or Miller's *problem solving*. Fretz (1998) found a negative correlation between family distress and problem solving in families with children diagnosed with ADHD, while Shepherd (1998) found high levels of rigidity in the families of emotionally disturbed children.

1.4.2 The Circumplex model of family function

Olson's (2000) Circumplex Model of family functioning represents an attempt at mapping out these functions and applying them in a clinical setting to families and their problems. It contains three dimensions, *cohesion*, *adaptability* and *communication* (see figure 2). The first two domains are seen as having a curvilinear relation to healthy functioning i.e. families do not function well if they are too cohesive or not cohesive enough and similarly with adaptability. Communication is thought to underlie both these domains and has a linear relationship i.e. the better, clearer communication the greater chance of healthy functioning, although only if it results in optimum cohesion and adaptability. Olson suggests that low cohesion will result in a *detached* pattern while high cohesion will result in an *enmeshed* pattern both being equally maladaptive for the family. There are some difficulties with the model however. A number of studies have demonstrated that the proposed curvilinear relationship, which is essential to the model, does not exist. Drumm, Carr & Fitzgerald 2000 found that rather than high levels of cohesion resulting in poorer function, it resulted in better functioning. It would seem then that a cohesive family, in which members are emotionally responsive and involved, is better able to manage roles and boundaries rather than becoming overly involved with each other.

Furthermore, there appears to be no room in the model for the individual's contribution to the system. While Minuchin (1974) described individual therapy as a magnifying glass with clear detail and a circumscribe field, this Circumplex Model appears to be a wide angle lens which perhaps loses out on the richness of the individual.

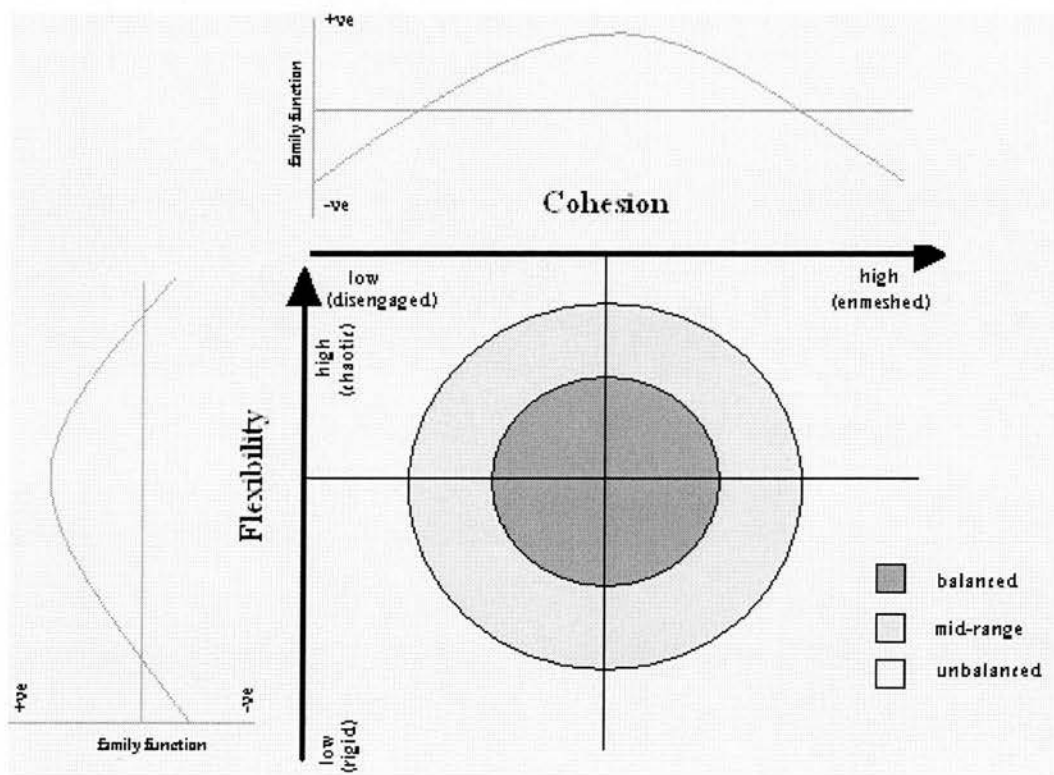


Figure 2 The Circumplex Model of Family Function

1.4.3 The McMaster model of family function

The McMaster Model of Family Function (Miller et al 2000) is an alternative model containing a greater number of more defined scales. With six subscales and a general functioning scale the model suggests a much more straight forward linear relationship between each of the scales and family function (see figure 3). The subscales include *problem solving, communication, role definition, affective responsiveness, affective*

pinvolvement and *behaviour control* along with the *global functioning* scale. It has been suggested that families can be considered 'unhealthy' if their scores exceed the established cut-offs on four or more scales (Akister & Stevenson-Hinde 1991). In the clinical setting, the dysfunctional family would be encouraged to think about these areas and with the help of the therapist develop newer more adaptive ways to function in those domains where its functioning was poor.

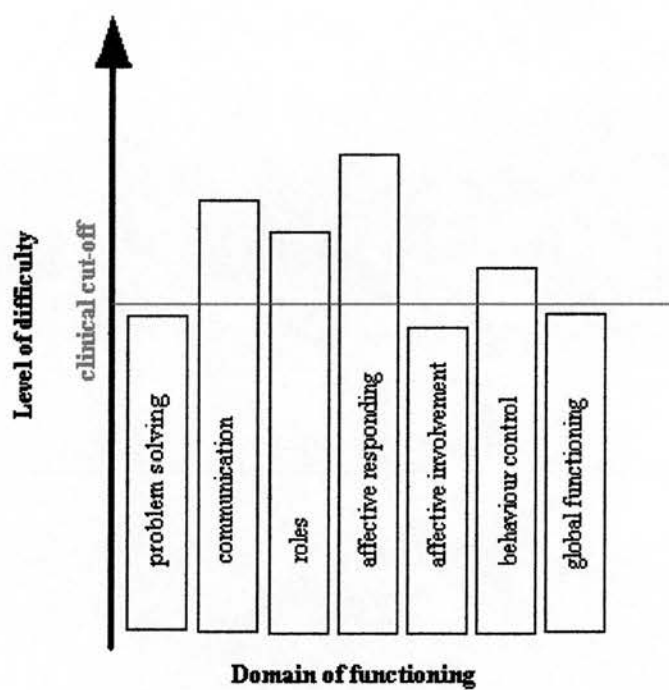


Figure 3 The McMaster Model of Family Functioning

While this is a clearer delineation of family function and structure and has been validated by many studies, (Carr 2000a; Tamplin et al 1998; McFarlane et al 1995), it has the same weakness as the Circumplex model in that the participation, perception and motivation of the individual (intra-personal characteristics) is overshadowed, even denied, at the expense of the group processes (inter-personal characteristics). Indeed the assessment device designed around the McMaster model sums scores across family members to give a

“family mean” score on each domain: any individual perception is lost both in the processes and the summing of scores. Furthermore, neither of these models makes any attempt at describing individual characteristics which bring about the particular style of functioning: the *working models* (Collins & Read 1990) which the new couple brings with them.

1.5 The individual in the family

While these models describe the processes involved in adaptive family functioning, it is important to remember that the primary function of the family unit is the development of the individual family members. Bloch et al (1994) have described the ‘minimum requirements’ of a family unit to foster such development. These include:

- To provide the basic necessities to develop a sense of identity
- Provide a sense of cohesiveness
- Provide a suitable context for sexual maturation
- Promote socialization into various roles
- To encourage each members creativity

These tasks all concern the welfare of the individual but only within the context of the family. While these are the tasks of the family group and although the mother and father are generally, and traditionally, the leaders of the group (Cox & Paley 2003), fulfilling these tasks is contributed to by all members. For example the continuing development of the parents’ creativity can only truly occur with the co-operation of the children, or more generally within a system that allows that creativity to continue. The way in which the family function as a unit is clearly influential on the functioning of the individual members, however it is important to recognise that the family processes are indeed a

function of the individual's own personalities. In particular, the parents within a family unit serve to drive these processes, since they predate any extended family unit and while their interactions will develop the "family script", their individual personalities will determine what those interactions look like. Belsky & Pensky (1988) suggests that information, affect and cognitive style brought from the family of origin is carried into the new family, proposing that new situations and relationships are understood and given meaning through the filter of old relationships. As the family develops, the relationship between their *models* of relating and the family scripts will be a reciprocal one (Caspi & Elder 1988).

It is clear however, from earlier discussion, that although systemic thinking can explain how the family deals with crises or how difficulties and distress arises in terms of disengagement or poor problem solving, within this the needs and motivations of the individual are omitted: there is no explanation of why father is more or less nurturing or why mother has become increasingly dependent on her children while father is at work (leading to the co-allitions described earlier).

There have been attempts from other areas of psychology to explain how these individual characteristics influence the family. The *filters* as Belsky & Pensky (1988) described or *internal models* (Bretherton & Munholland 1999) each partner brings to the relationship combine to develop the framework upon which the new family unit is created (Rothbaum, Rosen, Ujiie & Uchida 2002; Cowan, Cohn, Cowan & Pearson 1996). Indeed some have suggested that the attachment framework is an alternative paradigm for understanding family functioning, while others have suggested that it is simply a different level of explanation (Koslowska & Hannay 2002). A number of theorists have attempted to

integrate the two models, however there are a some theoretical difficulties. In particular, attachment theory concerns itself with dyadic relationships describing behaviour as a function of the interaction between two people based on their interpretation and understanding of the form and function of relationships (Akister & Reibstein 2004). Systems theory, as previously discussed, operates in the realm of multi-functional embedded systems containing as few or as many individuals as necessary. It is a way of describing the interactions of individuals and the functions of those interactions, whereas attachment theory concerns itself with the motivations and needs of the individual. The two appear almost polemic.

1.5.1 Attachment Theory

Attachment theory, based on the work of John Bowlby (1969), suggests that the way in which we view relationships as adults, and therefore the way in which we interact with others, is a function of our early experience. As a baby there is a drive to be close to another individual in order that ones physical and emotional needs are met. On a physical level keeping a parent close ensures safety and the meeting of needs such as nourishment. The expression of this drive to relate is experienced by the child as emotion: the child struggles to modulate its own, sometimes overwhelming, emotion and the proximity of a caregiver or 'secure base' has the effect of reducing this emotion (Mikulincer, Florian, Cowan & Cowan 2002). When faced with a perceived threat, the child behaves in a way which elicits behaviours in the caregiver which reduces the child's distress (Marvin & Britner 1999). This way the child can modulate the proximity of the care giver maintaining their own distress at an optimal level.

This *felt security* allows the child to explore and experience its world in an engaged way. A child not consistently experiencing such security is likely to be preoccupied by seeking security leaving it unable to experience its world fully, thus unable to develop the skills to interact with it effectively (Bowlby 1969). As the child's experience of this relationship develops and through the child's interaction with the caregiver, their availability, sensitivity and consistency, the child comes to understand what a relationship should be like (Bretherton & Munholland 1999). Alongside developing a representation of carer and relationship, the child develops a sense of their role in the relationship i.e. their worth or value and their position in relation to other (Holmes 1993). They develop according to attachment theorists, an *internal model* of what an attachment relationship would be like. Bowlby (1969) suggest that a child can have multiple attachment relationships with various individuals e.g. mum, dad, grandparents and each will have a different salience, i.e. they are hierarchical.

Through time, the child develops and the need for proximity to the child's primary care giver reduces as the ability to modulate these strong emotions develops. Increasingly the child is able to use the relationship as the secure base or to achieve felt security rather than the person (Marvin & Britner 1999).

Ainsworth (1985) suggested that for the majority of children, there is an attachment figure which is sufficiently consistent and responsive, or attuned, to allow a 'healthy' internal model to evolve. These children became known as *securely attached*. Occasionally, however that secure base is either absent or inconsistent. In these cases the child develops strategies to reduce the emotional discomfort which arises from the absence of felt security (Holmes 1993). She labeled one group *avoidant* and proposed they were the result of

absence of attachment figure. In these circumstances the child learns to minimise its need for the attachment figure in order to avoid rejection. These children become self contained and unable/unwilling to connect with others. The third style of attachment labeled *anxious ambivalent* occurs when the care giver is inconsistent or poorly attuned to the child's needs. In these circumstances the child may become excessively 'clingy' or 'needy', in an attempt to maintain proximity, however the negatively experienced nature of the proximity also makes it unpleasant (or unsatisfying). These children are likely to have difficulty getting close to others, yet are driven to do so (Hinde & Stevenson-Hinde 1991).

1.5.2 Adult Attachment

Initially, these internal models, once developed in early childhood were thought to be stable and Hazan & Shaver (1987) suggested that these internal models were the basis of romantic relationships in adulthood. In a study of over 600 subjects it was found that the ratio of the three attachment styles in the adult general population was similar to that in the child population. This was taken as support that attachment styles maintained throughout life. Furthermore, they found that the qualities described in these adults' relationships were similar to the description in children. This was taken as further evidence that the nature/shape of relationships in adulthood reflect childhood experience mediated by the individuals 'internal working model' (Hazan & Shaver 1987). Clearly this matching of ratios is no evidence for this maintenance since it simply suggests that some 60% of relationships take a certain form regardless of age while the others take a different form: adult individuals were reporting on their feelings about partners and relationships and perhaps their feelings were a function of their experience of that relationship (which may be considered a systemic view) rather than a function of any internal state.

Nonetheless this view of love as an attachment relationship has become a focus of interest (Feeney & Noller 1990) and subsequent work has supported the persistence of these internal working models, although more recently the consideration that they are amenable to change through long term exposure to alternative relationship experiences has become established (Waters, Merrick, Treboux, Crowell & Albersham 2000; Davila & Bradbury 2001; Akister & Reibenstein 2004). In a study in 2000, Cook examined the interpersonal aspects of adult attachment. He suggested that the internal model did have some consistency, however the nature of an individual's relationship seemed to be as much a function of the current relationship as any internal schema, i.e. the relationship is some function of the interaction of both partners internal models. Unfortunately this study was carried out with a non-clinical sample of high socio-economic status, well educated families in which one may expect to find a higher percentage of 'secure' attachment styles which are in themselves adaptable (Diehl, Elnick, Bourbeau & Labouvie-Vief 1998).

It would seem then, attachment styles or internal models would be an ideal adjunct to a systemic approach giving some explanation for the way in which the systems come about, and maintain. This allows for the development and evolution of the family environment and the symbiosis of individual and system (Cook 2000).

1.5.3 Attachment and the family

In general it is believed that the more secure an individual's attachment style, the more flexible, fulfilling and adaptive will be their family relationships (Diehl, Elnick, Bourbeau & Labouvie-Vief 1998; Mikulincer, Florian, Cowan & Cowan 2002). Both attachment theory and family therapy have delineated distinctive patterns of relating within family units (Akister & Reibstein 2004) and both have taken particular interest in dysfunctional

relationships (Johnson 2003). One such pattern has been described as the preoccupied mother-dismissive father pattern in attachment terms and the enmeshed mother-detached father in family systems terms (Rothbaum et al 2002). Both describe a dyad in which mothers' intense emotional needs are overwhelming for the father who disengages from the system in order to maintain his own sense of emotional stability Rothbaum et al (2002). Interestingly, work by Davila & Bradbury (2001) has suggested that this type of relationship can be an enduring one, however it is often characterised by both conflict and unhappiness. It would appear that these two constructs are describing the same family pattern, however there is little empirical evidence looking at whether these two models co-occur in vivo.

Of significance in terms of Child and Adolescents M H Services, is the suggestion that as well as being resilient within the individual, attachment styles are transmitted intergenerational (Steele, Steele & Johansson 2002). Pre-occupied (anxious ambivalent) mothers are likely to become highly anxious about their children and have difficulty separating from their child which may fail to promote the internal regulation discussed earlier (Cook 2000). This is likely to result in a mirroring of mums attachment style in the child which places the child at risk for emotional and adjustment difficulties (Rothbaum et al 2002). This idea concurs with the systemic view of the 'enmeshed' mother having difficulty maintaining boundaries and independence (Johnston 2003).

1.6 Divorce, separation and families

While the majority of research into family function has been carried out with the 'traditional family', where the changing work demands have created shifts in family functioning, similar patterns have been found in 'non-traditional' families (Lamb 1997). In

the case of divorced or single parent families, there is some suggestion that the effect of absence of one parent has an effect on the way the remaining family functions. It is widely reported that the children of such families have poorer outcomes in terms of education (McLachlan & Teitler 1999), emotional well being (Thompson & Laible 1999), mental health (Lipman, Boyle & Dooley 2002) and behaviour (O'Halloran & Carr 2001). In over 90 per cent of divorces, the custody of the children is still awarded to the mother (Riggio 2004). Given that the traditional model of father providing the majority of income to the house still occurs in most households, the consequence is a substantial loss of financial resource for the remaining family members. A number of studies have suggested that this may be the reason for the poorer adjustment in these families (McLanahan 1999; Lippman et al 2002).

The reduced ability to provide material support in the form of activities, schooling and even fashionable clothing has a significant impact. Kelly (2000) further reports that even controlling for socio-economic status, children of divorced families are more likely to use alcohol, drugs and, in the case of girls, give birth while still in their teenage years. Furthermore, although the subsequent introduction of a step-parent may mitigate some of the difficulties, the outcomes for this group remain poorer (Thompson & Laible 1999; Clarke-Stewart, Vandell, McCartney, Owen & Booth 2000).

However as Tein, Sandler & Zautra, (2000) point out, not all children where income drops in this manner have poorer educational or behavioural outcomes. They suggest that the parents' ability to cope with the change is a mediator for the effects of divorce. Mothers often have to adjust their lifestyle to accommodate the reduced income by increasing hours worked and making alternative childcare arrangement. The increased stress of fathers

absence (leading to reduced support in supervision, behaviour management and emotional support) combined with the reduced income, stretch mothers resources and abilities thinly. Tein et al (2000) have suggested that some mothers, as a result of the stress, become less communicating, more self involved and less supportive of their children leading to more coercive parenting styles and reduced supervision which in turn lead to poorer psychological and behavioural outcomes, while Riggio (2004) suggests that the conflict often experienced in divorce, can lead to more coercive and less emotionally engaged parenting.

Thompson & Laible (1999) suggest that the effects of divorce may depend on the way the family function during this critical post divorce period. For example, Kelly (2000) noted that continued contact with the non-custodial parent usually leads to better academic and social adjustment in children. However any positive effect can be diminished because of the conflict the contact creates between the parents.

Although relatively rare, Herrerias (1999) and Santora & Hays (1998) reported on groups of post-divorce non-custodial mothers. While there was little description of the outcomes for the children there were significant difficulties in the relationships between the ex-partners. In particular, despite reporting high levels of contact with the children all members of the family had difficulty adjusting to the change while much of the communication between partners was directed through the child.

While Herrerias (1999) suggested 97 per cent of planned visitations were attended in her sample of mothers, the contact between non-custodial mothers and their children reduced with time. A similar pattern was found in non-custodial fathers. Thompson & Laible

(1999) reported that year on year, visitation rates reduce in duration, frequency and regularity with up to 25 per cent losing contact within three years.

Reports of the involvement of non-custodial fathers are ambivalent. White & Gilbreth (2001) suggests that some contact with the child is better than none at all, while Amato & Paul (1999) suggests that the only thing that is widely agreed about non-custodial fathers' involvement is that their financial support has a positive effect.

Interestingly, the majority of research on divorce in families has been done by collecting data from mothers and McLanahan & Teitler (1999) has demonstrated that mothers significantly under report fathers' contacts with the children as well as making substantial attempts to sabotage the contact (mothers own reports). Kelly (2000) found that maternal dissatisfaction with paternal visits were a better predictor of the child's outcome than conflict levels, suggesting that there does not even have to be overt conflict, simple disapproval can be enough to reduce any positive effect of contact.

It would appear then that simple contact with the non-custodial parent is not sufficient to improve outcome for the child, it is the nature of the contact which is important. Taanila et al (2002) reported that the critical factor in children's post divorce adjustment appeared to be the "psychological closeness" (cohesion) of the contact rather than the quantity; a finding replicated in a number of studies of absent fathers (Wallerstein & Kelly 1981). Indeed Guttman & Rosenberg (2003) have suggested that in divorced or separated families, children report reduced intimacy with both parents, not just the non-custodial parent. In such circumstances divorced children may fall into roles which would not have been available to them otherwise, such as meeting a parent's emotional need (in the

absence of a partner) or co-parenting (in the presence of siblings) (Lippman et al 2002) which may in turn lead to the enmeshment and coalition described earlier.

However what is not clear in these studies on post divorce functioning and child outcome is any discussion about the shape or level of pre-divorce functioning in these families. Children with emotional, adjustment and behavioural problems exist in intact families (Kelly 2000); many of these descriptions of post-divorce impact on children take no account of either how pre-divorce functioning (which may after all have been instrumental in reaching the point of divorce) may have affected the child, or indeed how the child's functioning may have effected the family.

Indeed Nock (1999) and others (McLanahan & Teitler 1999; Kelly 2000) have suggested that poorer post-divorce outcomes may have more to do with pre-divorce family functioning than the divorce, separation or any subsequent reconstitution; the divorce and subsequent maladjustment is because the family always functioned poorly. A study by Clark-Stewart et al (2000) found that children in single parent families had consistently poorer outcomes than either intact or divorced parents, suggesting that behavioral and adjustment outcomes had more to do with family structures, resources and parenting than divorce or separation. This would further confirm the importance of family functioning in the development of the child which appears to be a consistent finding within the literature on fatherhood in intact families (McBride, Schoppe & Rane 2002).

1.7 Fathers in families

1.7.1 The changing father's role

The traditional role as 'head of the house' has been shaken from many directions, creating new roles and expectations. As Moss (1997) suggests "there is a general acceptance that

the Fatherhood role is not what it was”, however what has replaced it may not be at all clear. The cultural view of the ‘modern father’ appears to be a strange blend of high expectations and poor achievement. Indeed even academic research has become entrenched in what has come to be known as the Role-Inadequacy Perspective (Hawkins & Dollahite 1997). This is the idea that fathers have failed to adjust to the changing societal role expected of them, with research exploring largely the nature of the mechanisms, predominantly internal, that have led to this failure. Reasons such as retaining power (Cassidy & Davies 2003) or rejection of responsibility (Morman & Floyd 2002) have been cited and this academic view appears to reflect the wider view of society.

In a one month review of media articles in the late 1990’s, Lloyd (1999) found a total of 238 articles referring to fatherhood. Of this almost 20 per cent reported fathers as monsters or villains, committing crimes against their families, while a further 15 per cent involved individuals’ reflections on their own experience of being fathered. Again the predominant message here was of fathers as “cold, not caring and unavailable”. Of the remaining articles, 17 per cent were generic articles describing the inadequacy of fathering in the late ‘90’s while 6 per cent described various aspects of sperm donation (i.e. highlighting the relative insignificance of fathers). Finally a further 10 per cent revolved around fathers’ financial obligations to their children, noting in particular the difficulties faced by the Child Support Agency- this notion does seem to run somewhat counter to the idea that the role of father has moved away from provider toward caring and sharing partner. Almost 60 per cent then were critical of the job fathers were doing in the new era of parenting.

The post war view of the father as a ‘gender role model’ for their sons has shifted to a nurturing caring parent and partner. This so called “essentialist” view (Lamb 1999) does

carry a basic assumption that increased participation of the father has some beneficial effect on the family, which is itself a contentious issue (Walker & McGraw 2000; Silverstein & Auerbach 1999), however there is a body of research which illustrates that increased involvement of fathers can lead to increased cognitive competence, increased empathy, more internal locus of control and reduced gender stereotyped attitudes (Hwang & Lamb 1997; Fagan & Inglis 1999; Lamb 1987). The latter may prove significant particularly in further reinforcing the altered view of the father's role for future generations.

Clearly then, the general view of the abilities and commitment of the modern day father's ability to adapt to this cultural ideal is highly negative. Interestingly, however, alongside this new image, there is still a strong message from within the media, which presumably either reflects or generates cultural ideals, about the financial imperative of the father's role.

1.7.2 How fathers participate

Radin & Goldsmith (1985) have suggested there are four factors which determine how a father will participate in the family. These are:

- **Motivation** - Does the father want to actively participate in the family? There are a number of models which look at this factor in particular which will be explored further below.
- **Skills/confidence** - Does he have the appropriate knowledge to be able to even deal with the practical matters of child care. Indeed this is perhaps the area that has been least explored in terms of research, although (Silverstein & Auerbach 1999) has suggested that while there has been a increase in fathers (self

reported) skill levels, the general consensus is that they still struggle with day to day duties of childcare. Even when skills are present, fathers often lack the confidence to be able to deal with problems independently. While on a very basic level, the level of sensitivity required of a 'good enough' parent largely comes through time spent with children (Radin & Goldsmith 1985) which may as described earlier, be problematic for new fathers because of work commitments.

- ***Support*** - Does his wife want his participation in the childcare activities, or would she rather that he fulfilled his more traditional role while leaving her to attend to childcare. Clearly the attitudes of both partners, and the extended family, are important factors in establishing whether the context will be supportive of involved fathering. Indeed there are some writers who would suggest that this newly discovered role of the male in the household is simply another expression of men exerting power and control over women. They are encroaching into and imposing themselves in a domain which has largely remained female dominated not for the good of the family but to increase their control over women (Walker & McGraw 2000).
- ***Institutional Practices*** - Clearly, as the figures suggest, males continue to be the predominant wage earner in most families, particularly in the early years. Indeed there is often a significant increase in the hours worked at the point of childbirth to compensate for the loss of the wife's income and the increased expense brought on by family life (Burghes et al 1997). There is therefore a question of how practical it is in terms of employers' paternal policies for the father to become involved in the new family.

Radin & Goldsmith (1985) however did also point out that every non-work hour translates to 40-45 minutes of childcare for women, while only translating to around 20 minutes of childcare for men, so perhaps the motivation mentioned earlier is the more significant factor.

This model of paternal involvement has been further explored by a number of studies (Erini & Buchanan 2003; National Institute of Child Health and Human Development 2000) which have attempted to describe the contextual factors which are most relevant to paternal involvement. Three of the most significant contextual factors appear to be maternal involvement with the children, maternal employment and marital satisfaction. In fact the NICHD (2000) study suggested that father's marital satisfaction was the most powerful predictor of his involvement in and satisfaction with parenting. Increased maternal involvement also appears to predict increased paternal involvement (Aldous, Mulligan & Bjarnason 1998), however these two together could be seen as reflecting a function of the family style of relating rather than saying much about paternal involvement, i.e. some families are simply more nurturing and expressive than others.

Levy-Schiff & Israelashvili (1988) by contrast focused on internal factors when describing fathering behaviour. While they agreed that marital satisfaction was a significant variable, they felt that this satisfaction was a function of the father's personality rather than of the relationship. Indeed they suggest that fathers who can assume responsibility in a sensitive, nurturing and caring way are likely to be more successful fathers while those who dislike restraint, obligation or new experiences are likely to be less successfully involved with their children. Fox & Bruce (2001) have suggested that one of the factors which appear to predict father's engagement with both the family and his children is what they term his

'role identity'. They propose that each of the individual's roles (e.g. partner, father, worker) play a part in how they view themselves and in turn how they behave.

These roles, which are all a potential source of self esteem, have a hierarchy depending on their salience for the individual and this hierarchy determines the level of commitment each receives. Even within these roles, there are aspects which may have greater salience for the individual. For example, within the role of father there are the aspects of 'breadwinner' or 'nurturer' or 'teacher'. Pasley et al (2002) have expanded on this idea proposing that the role identity of the father interacts with the beliefs of his partner. His hierarchy may be altered or reinforced by recognition from his partner. For example, if the role of breadwinner is high relative to nurturer on father's hierarchy and mother gives him recognition for this then he is likely to commit greater resources to fulfilling this role in order to increase his self esteem. The result may mean some level of disengagement from the family as he attempts to further his career and self esteem by committing to success in the role. By contrast, if the same father's partner were to give more recognition for nurturing than providing resources, then breadwinner may receive less commitment because nurturing affords greater self esteem.

There appears to be considerable parallels between this concept and the Human Capital Theory mentioned earlier. If a particular household consisted of a male who had high investment in the breadwinning role and a female who also valued this in a partner, then a system where the male is committed to work and all that entails (longer hours and greater effort) and the female is happy to support that role (i.e. play the more traditional housewife role) is likely to develop.

Interestingly however, the two theories describe very different forces in bringing about the same equilibrium. Human Capital Theory proposes an almost oppositional system in which male and female seek to avoid household duties based on the level of resources they can provide, whereas the idea of role identities provides a much more complimentary description of how partners' take account of each others views to find a 'best fit'.

Finally, it has been suggested that father's level of engagement with the child is a function of attachment style (Mikulincer et al 2002). Preoccupied (anxious-ambivalent) fathers are likely to have difficulty maintaining emotional engagement yet simultaneously desire closeness. This is often a source of both internal and external conflict as father attempts to balance these two opposing forces (Liddle & Schwartz 2002). Fathers who fall into the dismissive (avoidant) category have been described as distant and unemotional, offering little to the processes of the family (Akister & Reibstein 2004). Attachment style clearly suggests a drive to behave in certain ways rather than simply describing behaviour and could be considered as the motivational factor in Radin & Goldsmith's (1985) model which attempts to include both internal and environmental factors in the explanation father's behaviour.

1.8 Context of the current study

Within the Moray area, there are a number of factors which may have led to a high density of families with a particular non-traditional form. A number of industries within this area require that their employees be absent from home for extended periods, often weeks or even months at a time. Fishing and the oil industry both demand their employees to be absent from home or anything up to a month at a time, while three local air force bases make their own demands on the service personnel who are posted there. Furthermore, the

isolation of the area has forced some other individuals to take up employment outwith the area during the week returning at weekends only.

Alongside absence from the home, these fathers are likely to be unable to attend Child and Adolescent Mental Health Services because of their prolonged absence. However it has been suggested that this absence is the norm across most Child and Adolescent settings (Shock et al 2002; Walters, Tasaker & Richards 2001). There have been a number of reasons suggested for this such as work commitments, however Carr (1995) suggests it is more embedded in Western Culture, where mothers and fathers have distinct roles, with mother engaged within the home on childcare tasks and carrying a particular responsibility for the child's emotional development. Conversely fathers exist largely separate from their children, functioning outwith the home environment. This would suggest some disconnection between the father's role and the child's emotional development.

It has been further suggested that fathers are simply unwilling to participate in the therapy process either because of their lack of ability, or willingness, to discuss problems (Atkins & Lansky 1986) or their perception of seeking help as 'weakness' or 'feminine'. Paradoxically, there is a substantial evidence to suggest that fathers' participation in family therapy is of substantial benefit (Walters et al 2001).

Within the therapeutic setting, the absence of the father has its own challenges. The assessment process of a therapist working within a family therapy framework is dependant on the therapist joining with the system in the therapy room in order to experience and observe the processes of the system (Miller et al 2000). It is only by immersing themselves in these processes that the therapist can hope to enable the family members to

examine and alter these processes thereby changing functioning and roles. The absence of any member of the family from these processes therefore impacts on how the functioning can become apparent in the room and in the content of the information the remaining individuals provide (Carr 1995; Carr 2001a).

Perhaps the more difficult aspect with these families is that the father is also absent, at least for periods of time, from the home environment. As described earlier, there has been a substantial amount of research on the functioning of families where there is no father figure or where marital ties have been severed through divorce, however this group fit with neither of these. In these families, the spousal connection maintains and the family continues to function with a 'revolving door' presence of the father. Clearly there is stability about the way that the family functions, however that pattern of functioning may, and indeed is likely to, be different from both divorced families and intact residential families.

Since presentation at therapy may be similar for all of these groups, i.e. the father is missing from the therapeutic setting; it would be useful to examine family functioning in more detail. This may allow greater sensitivity to styles of functioning within the home when dealing with that group where the father is absent, because of employment, at other times.

1.9 Aims of the study

The aims of this study were two fold. Firstly an attempt was made to explore differences in family functioning between two groups of 'traditionally' intact families with very different structures: in one the family unit live together while in the other father spends a proportion

of his time away from the family home through employment demands. In the second group then father is physically less available to participate in family processes. Both groups have been selected from the clinical population (i.e. have been referred to Child and Adolescent Mental Health Services) in order to: i) match levels of stress in the two groups ii) catch all families at a similar point in the family lifecycle and dealing with similar challenges. Describing the family functioning of the group of absent fathers will have clinical utility for therapists dealing with families where the presentation in therapy reflects the functioning at home despite the family co-habiting. i.e. father is absent from the processes

The secondary aim is to explore whether there is a consistent relationship, as predicted by Rothbaum et al (2002), between family function and attachment styles of the parents within this particular structure of family and whether that differs from the more traditional family arrangement.

1.9.1 Hypotheses

The primary hypothesis was that there would be a difference in family functioning between the two family structures. Despite similar membership, father's physical detachment will lead to reduced engagement and lower cohesion. The heightened breadwinner status, exaggerated by his employment based absence, however is likely to result in more traditional, clearer roles.

Hypothesis two is that fathers' absence from the home will result in higher levels of disturbance in children's behaviour

The third hypothesis is that there will be higher levels of comfort with closeness and lower levels of anxiety about the relationship in the group where fathers reside at home.

2 Methodology

2.1 Design

The design is a between subjects design, with two groups identified. One group consists of families where father is either absent from the house overnight for periods of time on a regular basis because of work commitments or is absent for longer periods on a less regular basis, again because of work commitments. The other group consists of households where neither parent is absent for any regular or extended periods of time

2.2 Recruitment sites

There were two main recruitment centres, Morayshire & Fife. The recruitment sites were chosen because both contain a high concentration of industries which require their employees to be away from home for considerable periods of time. Both regions have a number of Armed Forces bases and Moray has close connections with both the oil and fishing industry which require time spent off-shore.

In the second centre, Fife, clinicians reported a great deal of difficulty identifying families from either group, only able to offer two cases for inclusion: both of these cases subsequently dropped out.

2.3 Participants

All participants were selected from families who were currently referred to psychiatric services, the aim being to compare the family functioning within similarly challenged families when a parent is absent. Both groups are likely therefore to have similar levels of difficulty, of the type therapists are likely to encounter. Differences in functioning within

the family are more likely to be about the absence, and any conclusions are potentially more generalisable to clinical populations of the type therapist will encounter.

The participants were parents of children who had been referred for 'challenging behaviour' to the Rowan Centre Child and Family Mental Health Service, Elgin, and Fife Department of Child and Family Psychiatry.

2.4 Definitions

Challenging behaviour: any behaviour which, on subjective report, significantly restricts either the individual or the family's daily functioning.

Absenteeism : where father is absent from the family home, through work obligations, either

1. for one or more nights on a regular basis i.e. per week.
2. for more substantial periods of time on a less regular or perhaps even unpredictable basis

Occasional trips for training or individual business matters will be excluded as will absences for non-employment reasons e.g. holidays, caring for a relative, divorce or prison.

2.5 Participant Selection

The participants were identified using the following criteria:

2.5.1 Inclusion criteria

The inclusion criteria were

- 1 at least one child between the ages of 5 and 16 in the family
- 2 child in this age range referred for challenging behaviour
- 3 Father is 'absent' from home through work obligations

- 4 Two parents living in the home

2.5.2 Exclusion criteria

- 1 One or more of the parents are experiencing serious mental health problems
- 2 The child displaying challenging behaviour is not of school age
- 3 The parents are co-habiting but do not consider themselves a 'family'

2.6 Measures

2.6.1 Demographics

Participants were asked some general questions about socio-economic status, education and job stress. They were also asked to give details about the nature of the absence where appropriate.

2.6.2 McMaster Family Assessment Device

The FAD (Epstein 1989) is a self-report questionnaire of 53 items assessing family functioning on seven scales : six 'dimensions': *Problem Solving*, *Communication*, *Roles*, *Affective Responsiveness*, *Affective Involvement and Behaviour Control*, plus an overall summary scale, *General Functioning*.

Problem Solving reflects the family's ability to resolve problems together. Communication refers to effectiveness, extent, clarity and directness of information exchange. Roles describes the efficacy with which family tasks are allocated and accomplished. Affective Responsiveness is the ability of family members to respond to situations with appropriate emotions, both positive and negative. Affective Involvement reflects the interest and concern that they have for each other. Behaviour Control describes the standards and latitudes for behaviour. General Functioning gives an overall rating of family functioning.

FAD items are marked by the respondent as 'strongly agree', 'agree', 'disagree' or 'strongly disagree', ratings are scored from 1–4 and an average score computed for each scale. The higher the score the less healthy the family functioning. Using clinicians' ratings as criteria, cut-off values have been established to give optimal discrimination between healthy and unhealthy functioning on each scale (Miller et al., 1985). It has been suggested that families can be considered 'unhealthy' if their family mean scores exceed the established cut-offs on four or more scales (Akister and Stevenson-Hinde, 1991).

A series of studies carried out to investigate the reliability and validity of the FAD have demonstrated adequate test–retest reliability, low correlations with social desirability, moderate correlations with other self-report measures of family functioning and significant differentiation between clinic-rated healthy and unhealthy families (Epstein et al., 1983 and Miller et al., 1985; Carr 2000). Test–retest correlations coefficients were: Problem-Solving (0.66), Communication (0.72), Roles (0.75), Affective Responsiveness (0.76), Affective Involvement (0.67), Behaviour Control (0.73) and General Functioning (0.71). Reliability and validity figures compare well with those of other measures of family functioning (Epstein et al., 1983 and Miller et al., 1985).

2.6.3 Dyadic Adjustment Scales (Spanier 1976)

This scale is a 32-item questionnaire designed to measure relationship adjustment and satisfaction in intimate couples, and has a range of 0 to 151 for both sexes. Construct validity, as well as internal reliability are adequate (Spanier, 1976). The scale measures dyadic adjustment along the following four components: *degree of consensus*, *cohesion*, *general relational satisfaction* and *affectional expression*. Dyadic consensus is the degree of agreement that couples hold on issues of importance such as handling family finances or

making major decisions. Dyadic cohesion refers to how often a couple engages in activities together (for example: 'Do you and your mate engage in outside interests together?'). Affectional expression concerns how often a couple expresses love for each other (for example: 'Do you kiss your mate?'). Dyadic satisfaction examines the degree of happiness in the relationship, as well as the frequency of conflicts experienced in the relationship. Crane, Middleton, and Bean (2000) have suggested a score of below 107 as an indicator of distress for married individuals. The DAS is the most widely used scale for the evaluation of marital characteristics in clinical and research settings.

2.6.4 Parenting Stress Index (Abidin 1990)

The short form of the Parenting Stress Index (PSI-SF; Abidin, 1990) was administered to provide a standardised assessment of stress associated with parenting for both parents. Parents are asked to respond to 36 statements in a five point scale ranging from "strongly agree" (scoring 5) to "strongly disagree" (scoring 1). The total overall score reflects the level of stress the parent is experiencing, with a score of 90 or above considered clinically significant. There are four subscale scores: *Difficult Child* (DC) which focuses on behavioral characteristics of the child that may make them difficult to manage including non compliance and demanding behaviour; *Parental Distress* (PD) which represents the level of distress a parent is experiencing as a function of personal factors which are related to functioning including an impaired sense of competence and stress associated with the restrictions imposed by the parent role; *Parent-Child Dysfunctional Interaction* (P-CDI) which indicates the level to which the child does not meet the expectations of the parent and the level to which the parent fails to find the relationship with their child intrinsically rewarding including feelings of alienation and rejection; *Defensive Responding* assess the extent to which the parent is presenting a favorable impression, low scores (10 or less)

could indicate either presenting a positive image, low investment in the relationship or genuine competence and integration. (Abidin, 1990). Test-retest reliability for this test has been shown to be very high over a 6-month period.

2.6.5 *The Parent Behavior Inventory* (Lovejoy 1999)

The Parent Behavior Inventory (PBI) is a brief self-report measure of parenting behavior for use with the parents of school-age children. The scale consist of 20 items, each of which the parent rates on a five point scale from “not at all true” (scoring 0) to “very true” (scoring 5). The PBI has two independent scales: *Supportive/Engaged* which represents behaviour intended to make the child feel comfortable, accepted, and loved including responsiveness to the child's needs, engagement in activities of the child's choosing, and sensitivity to the child's emotional states; *Hostile/Coercive* assesses controlling parental behaviors that involve threat, coercion, physical punishment, or guilt.

2.6.6 *Child Behaviour Checklist* (Achenbach 1989)

The CBCL is designed for use with children aged 4-18 years and is completed by a parent or guardian. The first part of the CBCL asks about the child's social, activity and school competencies. The parent is required to rate the child as above or below average or simply average, using their peer group as comparators, i.e. *Compared to others of the same age how active is he/she*. The second part comprises a list of 118 specific behaviour problems which cover a broad range of behaviour. These items are then grouped into 8 domains, including *withdrawn, somatising, anxious/depressed, social problems, attention problems delinquent behaviour and aggressive behaviour*. In Moray, the CBCL is already routinely collected from all patients as part of the triage process.

2.6.7 Attachment Style Scale (Nancy & Stephens 1990)

This is an 18 item self-report scale which asks questions about close relationships. It is based on the Hazan and Shaver (1987) three-category model of attachment in adults which in turn is based on Ainsworth's original model. The model is developed into a dimensional model rather than a categorical model. This is based on the idea that rather than discreet types of attachment, given the variation in individual experience and development, there is more likely to be a range of elements which make up an attachment style. While people will inevitably fit better into one attachment category than another (secure, anxious ambivalent or avoidant) people display behaviours from more than one. The scale consists of three dimensions: *Close* which assesses feelings about closeness to other individuals; *Depend* which represents judgments about the dependability of others; *Anxiety* which measures the feelings of abandonment or of being unloved. Individuals are asked to rate each of the 18 items on a 5 point likert scale ranging from "very characteristic" to "not at all characteristic"

This method also therefore allows attachment style to be described in three dimensions, although there do appear to be discreet groupings which correlate with the categories described by Shaver and Hazan (1987)

2.7 Procedure

A research protocol flow chart is attached in appendix I

Stage 1

Clinicians in the two sites were asked to identify four families who met each of the 'case' and 'control' criteria from their case load. They were asked to match their cases and controls as well as possible for child's age. Once identified, the clinicians were asked to

approach them during a regular clinical contact and ask if they would be willing to participate. If they refused at this point, the clinicians were asked to identify an alternative family.

Stage 2

When the families were identified and approached by their clinician at the relevant psychiatric service, they were given a consent form (appendix II) along with a patient information leaflet (appendix III) and an envelope addressed to the researcher. Patients were encouraged to read the leaflet and contact the clinician or researcher with any further questions. A courtesy letter was sent to the patient's G.P to ensure they had the relevant information should the patient decide to consult with them (appendix IV).

Stage 3

A set of questionnaires was sent out to all individuals who return their consent form. Each individual who returned a consent form was allocated a number which was placed on the pack of questionnaires sent out. This number was held in a register with the corresponding names by the researcher. The questionnaires sent out did not ask for identifiable information such as name, date of birth or address. This ensured that the questionnaires could not be attributed to the respondents should they have been wrongly delivered or gone missing in the post.

The packs (appendix V) contained the McMaster Family Assessment Device, The Dyadic Adjustment Scale, the Parenting Stress Index, the Parent Behaviour Inventory and the Adult Attachment Scale. With the exception of the PSI, all questionnaires were printed on A4 paper and fastened together as a pack. The questionnaire pack had no patient details

attached in order that they could not be identified when being returned. The PSI however was a pre-printed form which was larger than the others. This was labelled with the participant number and enclosed in the envelope with the others. The partners were asked to complete the questionnaires separately and return them to the researcher.

Stage 4

Once the questionnaires were returned, data was checked for any scores which may suggest extreme distress. None were found, however had there been any, the individual would have been contacted to discuss options and offer support.

During this process, contact was only made with the participants when either the consent form or the questionnaires were not returned. For each participant, if the consent forms were not received within a period of three weeks, the researcher made contact by telephone to confirm their on-going participation in the study and to furnish fresh forms where appropriate. After one such reminder, if the forms were still not returned within a further two-week period, the participants were once again contacted. If after this prompt the forms or questionnaires were still not forthcoming, the participants were assumed to have withdrawn from the trial and no further contact was made.

Stage 5

The returned forms were matched with the names from the register and data from the Child Behaviour Checklist (CBCL) which were already in the patients' Psychiatric file. The CBCL is sent out to all patients while they are on the waiting list. All personal/identifiable information removed from data and families effectively leave the study.

2.8 Analysis

The initial level of analysis was contrasting the two groups using t-tests. However since this was a somewhat exploratory study, correlations would be used to uncover significant relationships between the aspects of family functioning measured and the possible stressors.

3 Results

3.1 Analysis

Throughout the study, analysis of the data was carried out using the Statistical Package for the Social Sciences (release 11.0).

Small numbers in each group mean that testing for normal distribution is less reliable. However all the dependant variables were tested for normality and two were found to be skewed. Male scores on the Parenting Stress Index were positively skewed (statistic =1.45, std error =0.687). Female scores on the Parental Behaviour Inventory were also positively skewed (statistic =1.97, std error = 0.794). Both were subject to a logarithmic transformation which brought them within the limits for normal distribution.

The area of employment based absence and its impact on family functioning is relatively under-researched making the development of testable hypotheses tentative. The study is therefore exploratory in nature. To this end, a number of post-hoc analyses have been carried out in an attempt to gain a clearer picture of the functioning of these families and how it may compare to more traditional households.

Theoretically, hypothesis testing and the accompanying statistical analysis of data are designed to answer one question at a time with a single test of comparison or relationship. Traditionally the level at which the researcher decides that any difference (or relationship) found is in fact a real one, as opposed to a product of normal variation (chance) is when the probability of achieving such a result is 1 in 20 i.e. such a magnitude of difference (or relationship) could only occur in 5% of instances were the two samples from the same population (H_0), or in the case of relationships where there was in fact no real relationship

between the groups (H_0). Denoted as the 'alpha' level or α , this is the arbitrary level at which it has become accepted that the null hypothesis (H_0) can be rejected and the alternative hypothesis upheld.

With each additional post hoc test carried out, the likelihood of committing such an error increases. Each time a comparison is made between the same two or more sets of data the likelihood of uncovering a difference (or relationship) that is in fact due to chance rather than a real difference is increased geometrically. Rejecting H_0 under such circumstances is known as a type I error. In the case of a single statistical test, the probability of having a non-significant analysis is $(1-\alpha)$ which, in the case of $\alpha=0.05$, is equal to 0.95. In other words there is a 95% chance of gaining a non-significant result. In the case where two analyses are carried out, the probability of a non-significant result is $(1-0.05)(1-0.05)$. The probability of finding a non significant result in n tests then is $(1-0.05)^n$. If for example ten analyses were carried out, then the probability of finding a non-significant result would be 0.6, or a 60% probability that a non-significant result would arise. This means there is a 40% probability, of achieving a significant result just by chance. It is obvious that the likelihood of a type I error has increased significantly (almost ten fold).

A number of solutions have been developed for dealing with this difficulty, the most common of which is called the Bonferonni correction (Clark-Carter 1997). This suggests that in order to maintain the overall (or familywise) alpha level at $\alpha=0.05$, for each analysis in the series of tests, the individual significance level is reduced. Because of the small magnitude of the number involved (0.05) it has been accepted that α^n roughly approximates $n\alpha$. It follows then that in order to maintain the familywise alpha level at $\alpha=0.05$, for each individual test, the significance level equals α/n .

In the case of the current study, within hypothesis one there have been around 66 post hoc analyses carried out. In order to maintain the familywise alpha level at $\alpha=0.05$, this would require shifting the significance level of each individual analysis to $0.05/66$, which equals 0.00076 (approximately 0.001). Applying this to each test would ensure no overall inflation of the likelihood of a type I error.

Unfortunately, however, such a manipulation is not without difficulty. The converse effect of the Bonferroni correction is to inflate the likelihood of type II errors, or those errors that occur when H_0 is not rejected in the presence of a real difference (or relationship) (Breakwell, Hammond & Fife-Schaw 2000). With a significance level of 0.001, the researcher is saying that when the difference (or relationship) between the groups is large (or strong) enough to occur in only 1 time in a 1000 when H_0 is true, then they are willing to accept that this represents a real difference or relationship, rather than normal variation. It is clear that this may lead to rejecting many differences as chance variation because they did not achieve this stringent criterion. In the case of an exploratory study as this one is, it is perhaps more valuable to accept an increase in the level of type I errors, in order that real differences, which may lead to further research questions, are not missed. The decision was taken therefore to maintain the $\alpha=0.05$ level for all tests, but to bear in mind the possibility of false positives and to be aware of this inflation in interpreting the results.

Furthermore, it is recognised when comparing the groups, in order to attain power of 0.8, even with a large effect size, the sample size would have to reach at least 26 (Cohen 1992) participants in each group which is substantially more than the numbers acquired.

Unless otherwise stated, all t-tests passed Levine's test for equality of variance (alpha level is $p < 0.05$). Statistics which reach the alpha level are denoted by italics.

3.2 Sample Characteristics

3.2.1 Non-returns and Compliance

Of the families identified by the clinicians across both centers, a total of 28 returned their questionnaires, all of which were from the Moray centre. The return rates for families in which father worked away from home was 75 per cent while in the homes where he did not it was 72 per cent.

Of those who did not return the questionnaire, two said that although they had declined because they thought the questions too intrusive and upsetting, they would be willing to discuss the matter face to face. Of the remaining families who did not complete, four said they would not be completing at the initial contact but gave no reason, while the remaining simply did not return, despite confirming on both contacts that they would complete the questionnaire.

Although sets of questionnaires went out as a pack for husbands and wives, in four households only the women returned the questionnaires. Two were from the away group and two from the home group. On further investigation, all four had refused to complete rather than forgetting or not having access (because of working away).

The PSI was not returned by 7 families. Of these 3 were from the home group and 4 from the away group on further enquiry, two had been unwilling (from the away group), three

though they had completed all requirements but were unwilling to complete any further questionnaire and the remainder could not be contacted.

The CBCLs were available for 18 out of the 28 families; 8 in the home group and 10 in the away group. These were the files in which completed CBCLs were present. A number of the files pre-dated the current triage system in the Moray centre and the remaining families had never completed one. Ethical approval had neither been sought nor given to issue CBCLs to families directly.

3.2.2 Demographics

There were two sample groups; Group 1 consisted of families in which the father did not have to stay away from home through employment obligations, termed, 'Home Group'; Group 2 consisted of families where father was obliged to stay away for short regular or longer less regular periods of time, termed, 'Away Group'.

The modal income range for the home families was £20,000 - £35,000 for the away families was £35,000-50,000, there was a significant between group difference ($U=52.0$, $p=0.037$), with the away group having the greater family income (see *figure 4*).

p Table 2 Sample characteristics

	home	away
Number of families	13	15
Gender of referred child	8 male ; 5 female	10 male ; 5 female
length of co-habitation (mean)	14.9 years (sd=4.35)	14.4 years (sd=3.88)
age of child (mean)	8.9 years (sd=2.4)	9.6 years (sd=2.8)
household income	£20,000-35,000	£35,000-50,000
education level - father (mode)	trade/technical certificate	secondary school
- mother (mode)	trade/technical certificate	secondary school
type of employment - father (mode)	full time	full time
- mother (mode)	part time	part time
Period during which absences have occurred	n/a	15.4 years (SD=4.23)
regularity of absence (mode)	n/a	2-3 weeks

There were no group effects for either male ($U=95.5$, $p=0.880$) or female ($U=95.00$, $p=0.904$) employment status.

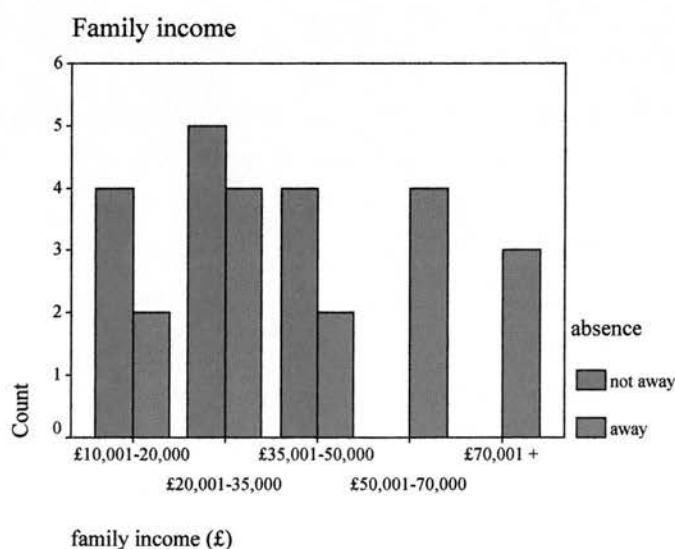


Figure 4 Family Income displayed by category and absence status

Similarly, there were no differences in levels of education between the men ($U=74.0$, $p=0.261$) and the women ($U=92.00$, $p=0.776$) in the home and away groups.

The mean length of cohabitation for partners in the home group and away group were 14.9 (SD=4.35) years and 14.4 (SD= 3.88) years respectively with no significant difference ($t=0.328$, $df=28$, $p=NS$, 2-tailed).



Figure 5 Length of marriage and years of father's employment related absence in the away group

For the away group, the mean length of time that the father had been working away from home was 15.4 (SD=4.23) years suggesting that the males' absence from the home began, on average, around the time or just before marriage. In fact in ten of the fifteen cases, working away either pre-dated or occurred within two years of marriage (see figure 5).

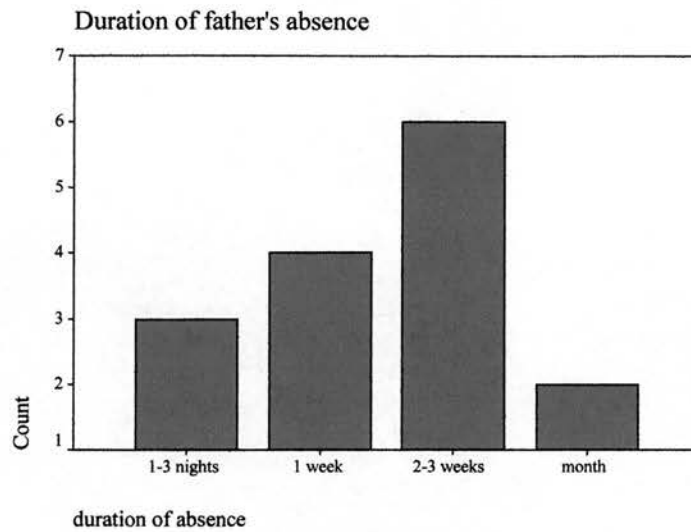


Figure 6 Duration of each absence

The modal length of stay away from home for fathers in the away group was 2-3 weeks (see figure 6) and these absences most often occurred either once per fortnight or monthly (see figure 7).

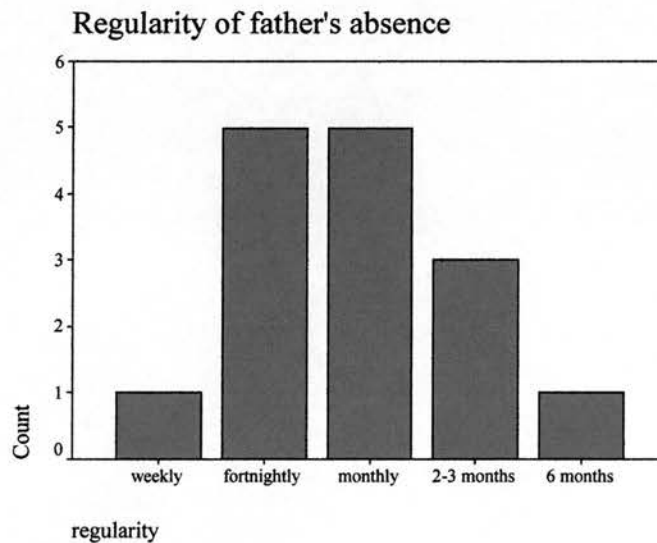


Figure 7 Regularity of father's absence

3.3 Hypothesis Testing

3.3.1 Hypothesis 1

The primary hypothesis was that there would be a difference in family functioning between the two family structures. Despite similar membership, father's physical detachment will lead to reduced engagement and lower cohesion. The heightened breadwinner status, exaggerated by his employment based absence, however is likely to result in more traditional, clearer roles.

Each partner completed an FAD and scores were calculated. These were then averaged to give a *family mean*. Scores are inversely related to functioning, i.e. higher scores equals poorer level of functioning in that domain. Differences between home and away family means reached significance level in *roles*, *affective responsiveness*, *affective involvement* and *global functioning* (see table 3), with the away families scoring lower (therefore functioning better) in all of these. It would appear then that in those houses where father spends considerable amounts of time living away from home because of his work commitments, there is improved functioning. There seemed to be significantly better levels of cohesion (reflected in the affective scales) despite father's absence. The prediction was that father's absence would lead to detachment from family functioning and the data do not support this. There does however appear to be clearer role definition in the away group as was originally predicted. The two groups rated themselves similar for *problem solving*, *communication* and *behaviour control*.

Table 3 Correlations and family means for FAD domains

Family Assessment Device Scale	Mother/father agreement Home (n=13)	Mother/father agreement Away (n=15)	Home family mean (SD)	Away family mean (SD)	Between group t- value (p-value)	effect size
Problem solving	r=0.457 p=0.140	r=0.775 p=0.002	2.2 (0.3)	1.97 (0.31)	1.811 (0.086)	0.35
Communication	r=-0.019 p=0.955	r=0.306 p=0.310	2.37 (0.25)	2.29 (0.21)	0.877 (0.300)	0.23
Roles	r=0.145 p=0.671	r=0.485 p=0.093	2.61 (0.22)	2.25 (0.24)	3.88 (0.001)	0.61
Affective responsiveness	r=0.430 p=0.187	r=0.760 p=0.003	2.43 (0.4)	1.92 (0.41)	2.963 (0.008)	0.53
Affective involvement	r=0.502 p=0.116	r=0.630 p=0.021	2.46 (0.33)	2.19 (0.34)	1.977 (0.038)	0.46
Behaviour control	r=-.577 p=0.063	r=0.675 p=0.011	1.91 (0.17)	1.76 (0.26)	1.592 (0.123)	0.32
Global functioning	r=0.628 p=0.039	r=0.804 p=0.001	2.23 (0.42)	1.85 (0.33)	2.529 (0.019)	0.47

However, as reported, the away group have significantly higher family income than the home group, therefore each of the subscales were entered into an analysis of co-variance, with absence status as a fixed factor and income as the covariant factor. In these circumstances, there was no longer significant differences between either *affective responding* ($F_{(1,24)}=2.762$, $p=0.114$), *affective involvement* ($F_{(1,24)}=2.100$, $p=0.162$) or *global functioning* ($F_{(1,24)}=1.803$, $p=0.194$), although *roles* continued to be significantly different ($F_{(1,24)}=9.580$, $p=0.005$).

A two way analysis of variance was carried out on each of the subscales (gender x absence) with only *behaviour control* reaching significance ($F_{(1,24)}=4.82$, $p=0.033$) suggesting that males in the away group considered behaviour control to be less of a problem while females in the home group felt it was less of an issue compared to their

partners, although only the mean rating of the fathers in the home group lay above the clinical level, despite all families being referred for challenging behaviour

Table 3 illustrates that in the home group agreement between mother's and father's ratings of family function only even approached significance in the *global functioning* domain, while the away group appear to agree in all areas except *communication* and *roles*.

3.3.1.1 The Family and Stress

Work Stress

Participants reported both their own and their partners' perceived stress levels related to their employment. There was no significant difference between levels of stress reported by males in the home and away groups (see *table 2*). Similarly, there were no differences in female stress levels in the home and away groups ($t=1.36$, $df=26$, $p=NS$, 2-tailed).

Males in the away group rated their partners as more stressed than those in the home group ($t=2.381$, $df=22$, $p=0.026$, 2-tailed) suggesting that away fathers were sensitive to the added pressures his absence may cause. There was no between group difference in female reports of their partner's stress levels (*table 4*).

In the home group the correlation between father's perception of mother's stress and her own reports was not significant, although female partners continued to be sensitive to their partners stress levels. In the away group, both correlations remained significant, suggesting that partners were more attuned to each others level of stress.

Table 4 Mean self report and report of partner's work related stress

	Home		Away		between groups	
	Mean (SD)	correlation n=13	Mean (SD)	correlation n=15	t-value (p-value)	effect size
Male self report	4.7 (2.4)	$r=0.670$ $p=0.024$	4.8 (2.4)	$r=0.750$ $p=0.003$	0.81 (0.936)	0.020
Female report of partner	4.7 (2.5)		5.9 (1.7)		1.428 (0.165)	0.270
Female self report	3.2 (2.5)	$r=0.332$ $p=0.319$	4.4 (2.2)	$r=0.803$ $p=0.001$	1.362 (0.185)	0.247
Male report of partner	2.7 (2.1)		5.0 (2.4)		2.381 (0.026)	0.434

Neither group showed any relationship between self reported work stress and global family function. In both groups, male perception of female work stress was correlated with their perception of global family functioning, however in very different ways. In the home group, male partners felt that as their partners became more stressed in the work place, *global functioning* improved (i.e. the score reduced) ($r=-0.724$, $df=11$, $p=0.020$), whereas the away group felt *global functioning* deteriorated ($r=-0.565$, $df=11$, $p=0.060$), although the latter did not reach significance. This pattern was also evident in male partner's reports of family *problem solving* i.e. in the home group males felt problem solving was better when their partners work stress was elevated ($r=-0.675$, $df=9$, $p=0.032$), while in the away group they rated it poorer ($r=0.674$, $df=11$, $p=0.012$).

There appeared to be no relationship between women's reports of their partner's stress and their perception of the family functioning in any domain in the home group, however the away group showed a negative correlation between their reporting of partners work stress and *communication* ($r=-0.776$, $df=13$, $p=0.001$), suggesting that as work related stress levels rose, the fathers became more communicative.

3.3.1.2 Parenting Stress Index

There was no significant difference in total parenting stress levels between the home and away groups for either men ($t = 0.948$, $df = 15$, $p = \text{NS}$, 2-tailed) or women ($t = 0.268$, $df = 18$, $p = \text{NS}$, 2-tailed). Within the female sample, the home women reported significantly higher distress than the away women on the *parent difficulties* sub scale, suggesting lower self efficacy ($t = 2.915$, $df = 18$, $p = 0.009$, 2-tailed). Women overall however, did appear to score higher on the *parent difficulties* subscale than their partners (male mean=27.76, $SD=6.85$; female mean =34.00, $SD=6.67$; $t=2.8$, $df=35$, $p=0.008$). Table 5 illustrates that women in both groups scored similarly in all other PSI subscales. Across both groups, men scored similar levels on all subscales (see table 2).

Within the home group, there appeared to be a significant level of correlation between father's and mother's scores on all scales except *difficult child* (see table 5), although fathers in this group were significantly less likely to perceive their own behaviour as a source of stress than mother ($t=3.06$, $df=20$, $p=0.006$, 2-tailed). Within the away group there appeared to be greater agreement between mother and father about sources of stress with disagreement only appearing in the *parent difficulties* (see table2)

All mother's PSI subscale scores were significantly correlated with her reports of work stress ($r=0.843$, $df=9$, $p=0.002$) in the away group, while in the home group there appeared to be no such relationship ($r=0.517$, $df=7$, $p=\text{NS}$).

Table 5 Father's and mother's subscale ratings on the Parenting Stress Index

	Home		Away		between groups t value (p-value)	effect size
	Mean (SD)	correlation n=10	Mean (SD)	correlation n=11		
Parent difficulties (father)	28.5 (7.12)	$r=0.762$ $p=0.010$	26.7 (6.87)	$r=0.081$ $p=0.863$	0.516 (0.613)	0.127
Parent difficulties (mother)	37.0 (5.9)		29.5 (5.18)		2.915 (0.009)	0.559
Parent child interaction (father)	32.0 (8.62)	$r=0.688$ $p=0.028$	26.03 (9.03)	$r=0.603$ $p=0.152$	0.945 (0.218)	0.320
Parent-child interaction (mother)	31.67 (8.91)		26.75 (5.99)		1.355 (0.192)	0.308
Difficult child (father)	40.0 (7.68)	$r=0.630$ $p=0.051$	37.14 (11.44)	$r=0.707$ $p=0.076$	0.618 (0.546)	0.145
Difficult child (mother)	34.91 (7.14)		37.87 (8.18)		0.857 (0.403)	0.190
Total stress (father)	100.5 (20.00)	$r=0.843$ $p=0.02$	90.3 (24.37)	$r=0.517$ $p=0.235$	0.948 (0.385)	0.223
Total stress (mother)	97.25 (29.86)		94.12 (16.79)		0.268 (0.792)	0.064

It would seem then that father's presence may have some moderating effect in the home group, while in the away group, stressors stack up in the absence of consistent support from a partner.

In terms of the stress created by the index child (PSI), for male partners in the away group, only ratings in the *problem solving* domain were related to overall stress ($r=0.762$, $df=7$, $p=0.046$). Within the home group, there appeared to be a much higher level of interaction between the stress of the index child and the family functioning for men. Their total parenting stress score was significantly correlated with *problem solving* ($r=0.680$, $df=9$, $p=0.031$), *communication* ($r=0.746$, $df=9$, $p=0.013$) and *roles* ($r=0.746$, $df=9$, $p=0.010$), while their rating of difficult child was significantly correlated with the two affect scores (*responding* ($r=0.695$, $df=9$, $p=0.026$) and *involvement* ($r=0.648$, $df=9$, $p=0.043$)).

suggesting that home males have a more integrated view of family function, being aware of the impact of the child on the family.

3.3.1.3 Marriage and the Family

Women in the home group rated their total dyadic adjustment lower than those in the away group ($t=2.78$, $df=26$, $p=0.01$, 2-tailed) however there was no significant difference among the men ($t=1.76$, $df=22$, $p=NS$, 2-tailed). For the women, there were between group differences in levels of consensus (agreement on important decisions and level of conflict) ($t=2.248$, $df=26$, $p=0.033$, 2-tailed) and marital satisfaction ($t=2.89$, $df=26$, $p=0.008$, 2-tailed) with the away group scoring higher on both (see *table 6*). For men, although there was no overall difference in marital adjustment, there was a significant difference in marital satisfaction ($t=2.937$, $df=22$, $p=0.008$, 2-tailed), and again the away group appeared more satisfied (see *table 5*).

Interestingly, there was no difference in the levels of cohesion (time spent in joint activities) between the groups despite one partner's absence in the away group; either they are making more time, despite the absence, or both partners are happy with the reduced time together. Scores given by both partners were significantly correlated in both groups ($r_{\text{home}}=0.788$, $df=9$, $p=0.004$, $r_{\text{away}}=0.793$, $df=11$, $p=0.001$) suggesting high levels of agreement between partners about the quality and level of adjustment in both. Mean scores for the subscales and total are shown in *table 6*.

Women's marital adjustment does not appear to be connected to their level of stress. However for men in both groups, work stress appears to interact with marital satisfaction but in different ways. In the away group, men appear to be more adjusted when work

stress is higher ($r=0.574$, $df=11$, $p=0.040$), while in the home group, work stress and marital adjustment have an inverse relationship ($r=-0.679$, $df=10$, $p=0.021$).

Relationships between perceptions of marriage and family function were compared. For both husbands and wives, there appeared to be substantial between group differences in the role of the marriage in family function. The total dyadic adjustment scores of both husbands ($r=-0.847$, $df=9$, $p<0.001$) and wives ($r=-0.841$, $df=11$, $p<0.001$) in the home group correlated significantly with global functioning on the FAD scales. This suggests that as marriages improved, functioning improved. By contrast, in the away group, neither husbands ($r=-0.321$, $df=11$, $p=0.05$) nor wives ($r=-0.197$, $df=11$, $p=0.08$) rating of global functioning correlated with dyadic adjustment. Within this group the only significant relationship for men was between the clarity of role definition (*roles*) and *dyadic satisfaction* and *dyadic cohesion*.

Given these differences in correlations between the groups and the consistency across male and female perspectives, it would appear that the quality of the marriage is much more tightly bound up with how the family functions in the home group than in the away group, or that in the away group the marital dyad and its perceived quality is somehow independent from the family unit and its level of functioning. In order to explore this further, an analysis of covariance was carried out entering *global functioning* as the dependant variable *absence* as the fixed factor and *total dyadic adjustment* as the covariate. The two main effects, along with the interaction of the two variables were entered as the model and for both men ($F=7.165$, $df=1,27$, $p=0.005$, 2-tailed) and women ($F=4.911$, $df=1,27$, $p=0.036$, 2-tailed) there was a significant interaction, suggesting that there was a

significant difference in the amount of variance marital adjustment accounted for in the perception of global functioning between the two group for both men and women.

Table 6 Means, correlations and differences in dyadic adjustment scale sub-scales

	Home		Away		between groups t value (p-value)	effect size
	Mean (SD)	correlation n=11	Mean (SD)	correlation n=13		
Male consensus	45.18 (9.61)	r=0.525 p=0.092	50.15 (6.24)	r=0.528 p=0.064	1.527 (0.141)	0.293
Female consensus	45.15 (6.32)		50.8 (6.92)		2.248 (0.033)	0.392
Male affective expression	7.90 (1.51)	r=0.401 p=0.222	8.46 (2.1)	r=0.966 p<0.001	0.707 (0.487)	0.151
Female affective expression	7.91 (1.55)		8.61 (1.92)		1.090 (0.286)	0.197
Male satisfaction	30.90 (8.21)	r=0.704 p=0.016	39.38 (5.83)	r= 0.795 p=0.001	2.937 (0.008)	0.511
Female satisfaction	33.53 (5.28)		39.07 (4.93)		2.891 (0.008)	0.411
Male cohesion	15.90 (7.01)	r=0.775 p=0.015	15.53 (4.59)	r=0.674 p=0.017	0.155 (0.879)	0.032
Female cohesion	13.61 (4.51)		16.13 (3.96)		1.527 (0.128)	0.284
Male total adjustment	99.90 (22.51)	r=0.788 p=0.004	113.53 (15.19)	r(11)=793 p=0.001	1.761 (0.092)	0.334
Female total adjustment	100.23 (12.83)		114.43 (14.45)		2.788 (0.010)	0.461

3.3.1.4 Parenting behaviour

Table 7 illustrates that there was no significant difference between mother's levels of supportive/engaging or hostile/coercive behaviour in the two groups. Males in the home group scored significantly higher on the hostile/coercive scale than those in the away group ($t=2.56$, $df=22$, $p=0.018$, 2-tailed), however there was no significant difference in supportive/engaging behaviour (see *table 7*).

There was a significant correlation between parents rating of hostile/coercive behaviour in the away group ($r=0.623$, $df=11$, $p=0.023$), suggesting that as one parent used increasing level of controlling coercive parenting, so the remaining parent would also increase this style of parenting. In the home group, there was no such correlation (see *table 7*). In fact the mothers use of supportive/engaging behaviour increase with fathers use of coercive parenting ($r=-0.646$, $df=9$, $p=0.032$) in the away group.

Table 7 Scores on subscales of the Parenting Behaviour Index

	home		away		between groups t value (p value)	effect size
	Mean (SD)	correlation n=13	Mean (SD)	correlation n=15		
male hostile /coercive	23.18 (5.72)	$r=0.202$ $p=0.552$	16.76 (6.39)	$r=0.623$ $p=0.023$	2.567 (0.018)	0.47
female hostile/coercive	16.53 (6.64)		15.66 (6.91)		0.339 (0.737)	0.06
male supportive/engaging	40.00 (4.47)	$r=0.383$ $p=0.248$	37.79 (8.00)	$r=-0.301$ $p=0.318$	0.659 (0.517)	0.15
female supportive/engaging	40.18 (9.9)		43.13 (4.53)		1.835 (0.078)	0.18

3.3.1.5 Proposed models for family functioning

In order to develop a model of family function for the groups, marital adjustment, parenting behaviour work stress and parenting stress were entered into a regression using the stepwise method. Global functioning was entered as the dependant variable. For the home group, the adjusted for male ratings of marital adjustment accounted for 52.2 per cent of the variance in global functioning ($R^2=0.522$, $F_{(1,9)}=11.91$, $p=0.007$). When the males report of female functioning was also entered, this accounted for 66 per cent ($R^2=0.663$, $F_{(1,9)}=18.964$, $p=0.002$)

In the away group, only one variable came out as significant and that was the female supportive/engaged score which accounted for 50.2 per cent of the variance in global functioning ($R^2=0.520$, $F_{(1,9)}=7.502$, $p=0.041$).

3.3.1.6 Summary of test of hypothesis 1

Hypothesis one stated that there would be significant differences in the levels of functioning between the families where fathers occupation required that he stay away from home for periods of time and those where he did not. The prediction was that father's absence would lead to less cohesive functioning and less engagement. It was also predicted that roles would be more clearly delineated. A number of measures were used to test the hypothesis.

In comparing family functioning the away group were more cohesive and there appeared to be a greater consensus about how well (or badly the) family functioned, although when the increased income in this group was controlled, the only continuing difference was that there were less difficulties with family roles in the away group.

Furthermore, the women in the away group judge their marriage as better functioning than those whose husbands spent time away from home although the men in both groups reported similar levels of marital adjustment. Despite the absence of one partner, there were no differences between the groups' stress levels, although women in the home group reported higher levels of stress related to their parenting skills than those in the away group. There was however some evidence that father's presence had a mediating effect on mother's stress levels.

Finally, males in the away group engaged in significantly less hostile/coercive behaviours than those in the home group, however there was no difference in supportive/engaging behaviour, suggest that fathers who had substantial periods away from home were as engaged with their children than those who were not away. There was some evidence however that couples in the home group compensated for each other in these styles, where as the away group appeared less co-ordinated. Overall then the data does not support hypothesis one since families in the away group functioned equally well if not better than those in the home group on all measures used. However there was some evidence that roles were more clearly delineated and more significant in the away group as predicted in the hypothesis

3.3.2 Hypothesis 2

The second hypothesis states that father's absence from the home will result in higher levels of disturbance in children's behaviour

3.3.2.1 Child Behaviour Checklists

CBCLs were collected from the files once the questionnaires had been returned. Scores on the subscales were then converted to t-scores and these were used in the comparisons. *Table 8* illustrates the means for both groups on the first seven subscales in which parent's rate individual behaviours. There were no significant differences between the groups on any of these subscales.

Table 8 Correlations between Family Assessment Device subscales and CBCL subscales

	Home Mean (SD) n=8	Away Mean (SD) n=10	between groups t-value (p-value)	effect size
CBCL Withdrawn	64.63 (8.42)	63.00 (12.43)	0.290 (0.775)	0.076
CBCL Somatic complaints	55.13 (5.69)	57.80 (7.65)	0.802 (0.424)	0.194
CBCL anxious/depressed	63.75 (8.10)	67.20 (15.05)	0.591 (0.569)	0.141
CBCL social problems	67.13 (11.15)	70.50 (15.89)	0.518 (0.619)	0.122
CBCL thought problems	69.13 (9.45)	61.80 (10.38)	1.490 (0.141)	0.346
CBCL attention problems	71.50 (10.73)	69.70 (13.74)	0.253 (0.766)	0.073
CBCL delinquent behaviour	66.38 (7.52)	61.20 (10.62)	1.181 (0.266)	0.271
CBCL aggressive behaviour	70.00 (10.29)	66.10 (14.96)	0.612 (0.540)	0.150

Similarly, there were no significant differences in parent's rating of their children's abilities in the school setting ($t=0.725$, $df=15$, $p=0.480$, 2-tailed), leisure activity setting ($t=0.340$, $df=15$, $p=0.739$, 2-tailed) and social domains ($t=0.382$, $df=15$, $p=0.708$, 2-tailed) against their peer group. *Figure 8* shows the means for both groups.

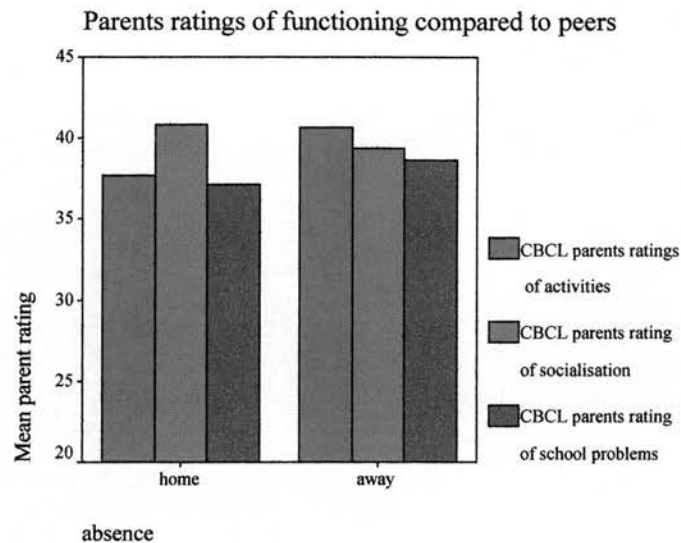


Figure 8 Parents rating of leisure, scholastic and social competence against child's peer group

The first three subscales of the CBCL make up an *internalising* compound score while the last two combine to make an *externalizing* compound score. These were also summed and compared between the two groups. Once again however there was no difference between the groups on either of these ratings (see table 9). The data therefore did not support hypothesis two

Table 9 Internalising and Externalising compound scores on the CBCL for home and away groups

	Home Mean (SD) n=8	Away Mean (SD) n=10	group difference t-value (p-value)	effect size
CBCL Internalising	61.17 (6.77)	62.67 (10.34)	0.378 (0.729)	0.086
CBCL Externalising	68.19 (8.25)	63.65 (12.49)	0.901 (0.391)	0.209

3.3.2.2 Summary of test of hypothesis 2

Hypothesis two stated there would be increased levels of disturbance in those children whose fathers spent considerable amounts of time away from home.

CBCLs were collected from the files of the referred families where available. There were no significant differences between the groups in any of the scales rated by parents. When the compound scales labeled internalizing and externalizing were calculated and compared, there were still no differences in functioning. The data therefore did not support hypothesis three and the null hypothesis could not be rejected.

3.3.3 Hypothesis 3

Hypothesis three states that there will be higher levels of comfort with closeness and lower levels of anxiety about the relationship in the group where fathers reside at home.

3.3.3.1 Attachment characteristics

Three aspects of attachment as measured by the adult attachment scale and were compared across the two groups. *Table 10* illustrates that there were significant differences in levels of comfort with dependence between mothers ($t=2.697$, $df=26$, $p=0.017$, 2-tailed) and fathers ($t=4.94$, $df=22$, $p>0.001$, 2-tailed) in the two groups. In both cases the away group rated themselves more comfortable with dependence. It would appear that the couples who are apart much of the time are more willing to allow their partners to take responsibility for joint concerns where necessary. Men in the away group had significantly lower levels of relationship anxiety (fear of abandonment) than men in the home group ($t=2.57$, $df=22$, $p=0.012$, 2-tailed).

Table 10 Means, correlations and differences in Adult Attachment Scale subscales.

	home		away		between groups	effect size
	Mean (SD)	correlation n=13	Mean (SD)	correlation n=15	t value (p-value)	
male dependence	15.54 (2.35)	r(11)=0.362 p=0.274	20.96 (2.91)	r=0.210 p=0.492	4.942 (<0.001)	0.716
female dependence	17.11 (3.02)		20.84 (3.04)		2.697 (0.012)	0.535
male anxiety	16.14 (3.72)	r(11)=-0.611 p=0.046	13.07 (1.99)	r=-0.627 p=0.022	2.57 (0.017)	0.458
female anxiety	15.00 (3.80)		14.41 (4.37)		0.384 (0.704)	0.072
male closeness	19.68 (3.21)	r(11)=0.285 p=0.375	20.46 (3.42)	r=-0.156 p=0.610	0.525 (0.605)	0.116
female closeness	18.75 (2.93)		20.57 (3.04)		1.592 (0.123)	0.292

Within both groups there was a significant negative correlation between partners levels of relationship anxiety (fear of abandonment) (see table 10), suggesting that partners manage to find equilibrium in their anxieties i.e. if one partner is very anxious the other tends to be much more relaxed about it, while if one is moderately anxious, the other is likely to be around the same level.

Within the home group, male rating of relationship anxiety correlated inversely with their comfort with closeness (r=-0.685, df=11, p=0.020) suggesting that as they become more anxious about the thought of abandonment, they become increasingly uncomfortable with emotional connection with their partner. The data therefore did not support hypothesis three.

3.3.3.2 Summary of Test of Hypothesis 3

Hypothesis three stated there would be greater levels of relationship anxiety and lower levels of comfort with closeness in the group where fathers spent significant periods away from home.

The adult attachment scale was used to test this hypothesis. In terms of comfort with closeness, there was no difference between the groups for either males or females and while there was difference in relationship anxiety; however the men in the home group reported higher levels than those in the away group. The data did not support hypothesis two, therefore the null hypothesis could not be rejected.

3.4 Overall Summary of Results

Hypotheses one and two predicted that father's absence would have a negative impact on the family. However the data did not support these predictions. In fact overall, functioning in the groups where father was absent for periods of time appeared better than those where he was not. Although it is important to note that once the increased family income of the fathers who worked away from home was partailed out, the only remaining difference was in role clarity in the direction predicted. There was some evidence from the data that father's presence was less influential in the family function in the away group, however levels of functioning were no different and mothers in the away group reported that their marriages were more adjusted, while fathers reported greater satisfaction. Similarly, father's absence appeared to have no significant effect on the level of distress in the child who had been referred to mental health services, compared to families where father was consistently present.

Hypothesis three examined the underlying attachment styles predicting that those in the away group would be less comfortable with closeness and more anxious about relationships. Once again however there were no significant difference between the groups and once again the research hypothesis was rejected. It would appear overall that on those measures used the away group had similar and occasionally better levels of functioning than the home group.

4 Discussion

One of the initial difficulties in developing the ideas for this study was the lack of literature available describing this group of families. There was a large body of evidence describing divorced and separated families and how they function, but very little on the temporary absences present in these intact families, which made developing a predictive model difficult. The primary aim of the study therefore was to establish whether there were differences in functioning between two groups of families with similar composition but differing structure: the differing factor being father's consistent or prolonged absence. In a sense the question was; are they similar groups of people who have differing demands on their lives or are they distinct groups who function differently and perhaps these arrangements are brought about rather than come about.

The demographic profile of this current study suggest that the two groups are composed of similar people in terms of education, employment status, levels of stress, length of marriage and age of the referred child. They do however differ in family income levels, with the away group earning more. Given the similarities of mothers' education and employment status, it is likely that this increased income is generated by the father and is likely to be a function of his absence (again education is similar giving no reason to believe they would differ in occupational achievement or responsibility).

The data relating to family function, marital adjustment and level of children's distress did not however support the prediction that away families would function less well than the home group. Despite father's absence in this group, families appeared to function as well and even better in some areas in comparison to the home group. In particular, there appeared to be greater levels of cohesion (affective involvement) and more clearly defined

roles. This was judged to be the case by both partners in the away group. Further more, there were higher levels of satisfaction with their marriage compared to the home group. It is widely reported in the divorce literature (Kelly 2000; McLanahan & Teitler 1999) that father's absence leads to increased stress levels for the remaining parent, which can in turn lead to reduced communication, support for the child and subsequently greater levels of both distress and behavioural problems. Yet in this sample, all of these aspects of functioning were reported by both partners to be no more problematic for the families where dad worked away, compared to the families where there was no absence. Indeed even if one were to consider the impact of the increased likelihood of being over inclusive caused by the multiple analyses, the home group still appear to have more defined familial roles, have greater cohesion and to be more satisfied with their marital relationship

Clearly the absence of father in this group, despite being substantial (on average father was away half of the time), interacts in a different way with family function than his complete removal as in the case of divorce. Perhaps one factor which may mediate the effect of the absence is that within this group of families, father's absence is consistent and has been for along time. i.e. this is a stable state and in divorce we see families move from one condition to another often accompanied by turmoil and physical changes such as relocation. In most cases the father has been away from home since very early in the marriage and usually before the child was born, on average more than 15 years. The significant or traumatic change which Clark-Stewart et al (2000) has suggested may contribute to post divorce difficulties have not been experienced. There has been a consistent framework around which the family system could develop. Perhaps more significantly however is father's ongoing contribution of income. Tein et al (2000) has suggested that deterioration in functioning in divorced families is related to (usually)

mother's reduced resources because of the loss of father's income. In this sample of away families their income was actually higher than the families where father remains at home, and what is more, the increased income appears to make some contribution to the fact that the away families report better functioning.

As predicted however, there appeared to be a significantly lower level of difficulty around roles in the families where father was absent compared to the home group. Both mothers and fathers felt that roles were more clearly defined in these families and when the effects of increased income was partailed out, difficulty with role was the only domain which remained significantly different, even at the adjusted significance level. Mum's consistent presence and therefore responsibility for childcare is likely to make her role clearer. Systems and functions around the children and household duties carry on regardless of father's presence, or as one wife commented, "we get on with things whether he is there or not". Father's relatively high earning power in these families may make his role as breadwinner more salient, particularly when income appears to have the strong influence over functioning in general. Indeed father's view of his marriage was closely related to how well defined roles were in the away group. If this were so, in Human Capital Theory terms (Aldous et al 1998), father would be less likely to be involved in the household and childcare duties even when at home. This is perhaps borne out by the difference in perception of the difficulties of the referred child.

Fathers in the away group did not appear to recognise the effect of the child and its difficulties on family function, whereas those who remained at home appeared to correlate the two significantly. Furthermore, this group of fathers appeared to have a much lower

level of concern about the control of difficult behaviour in their families than their wives which was the opposite from the home group.

Interestingly, when it came to levels of agreement about family function, different patterns emerged between the groups. There appeared to be considerable consensus between partners about most areas of family function in the group where father spent time away from home, many even reaching the more stringent level of significance. However, in those families where father was never away from home, partners disagreed about every area. This appears contrary to what might be expected, since partners in the home families are likely to be sharing more of the same functions and difficulties.

It was clear from the ratings of parenting stress that fathers were considerably more likely to 'blame' the child for the stress while mothers were more likely to believe that the difficulties were the result of their own inadequacy as a parent. Father's absence however gives ideal opportunity for what Allen & Hawkins (1999) describe as 'maternal gatekeeping' which describes mothers protection of the domestic domain, and her power therein, by restricting father's access to, or information about, the home setting. For example, if the status quo meets mother's needs for autonomy and resources, she may modulate the level of difficulty she passes on to father in an attempt to ensure that he does not decide to stop his absences to offer her increased support at home.

One could speculate then, that the fathers in the home group are experiencing the difficulties for themselves and bringing to bear their own attribution style which explains the discrepancy, between their and their partner's views, while fathers who are away are

experiencing fewer difficulties directly and are having a substantial amount of information channeled through their partner and her attribution style.

Findings from the effects of stress on functioning lent some additional support to the idea that fathers who worked away being less integrated into the family system. The effects of stress on the family were very different in the two groups. Fathers who worked away from home felt that increases in mother's work stress meant poorer functioning whereas when father was at home, family function improved as his rating of mother's work stress increased. Mothers in the home group appear to fit with Gottfried et al (1999) findings which suggest that increased work commitment leads to improved functioning at home, however this does not hold for the away group. Dubas & Gerris (2002) on the other hand suggests that occupational stress places additional strain on the family and this appeared to be the case for women in the away group. Clearly neither holds for both of these groups and there must be some intervening variable which accounts for the differing effects

The data appeared to suggest that fathers who are always at home have a mediating effect on mothers stress levels. Work and parenting stress seem not to be related for mothers in the home group, while in the away group there is a cumulative effect of stressors for mother. Once again the latter attained significance approaching the elevated level required for the multiple comparisons suggesting a very strong effect, yet there was no such effect in the home group. Father's presence appears to act as a buffer for mother, perhaps even suggesting that as mothers become more stressed, fathers in the home group take on some of the burden, although stress levels were similar in both groups.

Alternatively, the differences in perception may simply highlight a difference in attitude toward working partners; men in the away group may have more traditional views about what women's roles should be and therefore disapprove of the intrusion of work, whereas those in the home group may value the contribution, or even the overall welfare, of their wife more.

There was also some support for Anju's (1996) findings about patterns of paternal work stress in the fathers who worked away. As both their own and their partners reports of his work stress increased, so communication appeared to be clearer, however that does not fit the model for the home group. On the contrary, as work stress increased, so affective involvement reduced. While they both only proved significant at the more liberal level, the contrasting valence of the correlations is perhaps more significant. Once again there appears to be a contrast in the ways which difficulties impact on functioning in the two sets of families. This was further apparent by the way in which occupational stress impacted on marital adjustment. Men who work away are more happily married when their job is more taxing, while those who work from home have the opposite effect. It would appear that the work role has a greater salience for the men who are willing to spend long periods of time away from their family. Increased investment in this role appears to have a positive knock on for other areas of functioning, which would fit with Woodworth, Belsky & Crinc's (1996) idea that father's functioning in the family is mediated by his self-esteem which is in turn related to his 'role identity' (Pasley et al 2002). In the case of the away group, salient identity appears to be that of 'breadwinner' and the more successful father is in this role, and the clearer its definition, the more satisfied he is with his marriage. Furthermore mothers in the away group appear to reinforce this role identity, affording it increased salience for father.

There was further evidence that fathers in the away group were less integrated into the family system than those who worked at home when subjects were asked about their marital relationship. There was a significant level of agreement about marital adjustment between partners in both groups, however women whose partners worked away reported higher levels of overall adjustment than those whose partners worked at home. In fact both partners in the away group reported being more satisfied with the marriage than the home group despite the male partner's consistent absence and the separation it brings. Interestingly, there was no difference reported between the groups in their perception of shared activities. Given that the male partners in the away group are less available for such shared time, this suggests that either the away group make an increased effort to spend time together when possible, or that the reduced amount of time meets their needs or expectations. Perhaps couples in the away group expect, or even seek, less interaction than those in the home group and the lower amount of time available meets those expectations, resulting in subjective satisfaction. As Carr (2001) suggests, relationships are a balance of closeness and independence and perhaps the crossover point is different for the two groups, therefore their needs are met in a different way. In either case, it would appear that the family system in the away group has developed (or was created) to meet the needs of the individual through differing processes.

Rothbaum (2002) suggests that the quality of the marital dyad is the key to overall family function and from the sample it appeared that in the home group the marital dyad was significantly correlated with overall family functioning. By contrast however, despite the away group reporting higher marital satisfaction, there was no such relationship between quality of the marriage and family function. This is also reflected in the models of family

functioning developed from the data collected in the present study. Within the home group, father's perception of marital satisfaction was the most significant predictor of family function while mother's work stress also contributed. However, in the away group, mother's level of positive interaction with the child was the only significant predictor. In the away group then, functioning is most dependant on mothers interaction with the child, however in the home group, family function depends on marital quality and the family's interaction with the outside world in terms of their working lives. While the model for the away family gives some support to McBride et al's (2002) idea that the quality of interaction is more important than the quantity, it also illustrates that the various levels of functioning are less integrated in the family who spend more time apart.

The pattern of parenting behaviour also afforded support, if only tentative because of the level of correlation, for the idea that away fathers are less integrated into the family system. Parents in the home group appeared to have a complimentary system of dealing with behaviour in so much as when one is using a coercive style the other appeared to adopt more encouraging and supportive methods, while in the away group it appeared there was greater concurrence about their approach. As mother became more coercive so did father. This could also be a function of the gatekeeping suggested earlier, with mothers using a "wait till your father gets home" approach and enlisting support on his return. Despite the less co-ordinated approach, however, the children in the away families appeared no more distressed than those in the home group. This would again suggest that the two family systems appear to have reached similar levels of meeting individual member's needs, despite their significantly different structure.

Unfortunately, what is less clear is whether these systems have emerged or were characteristic of the individuals when they first met. There were clear differences in attachment styles between the groups, with the both men and women in the away group being significantly more comfortable relying on others. Furthermore, the men in the away group, at a somewhat lower level, appeared less concerned by worries about being abandoned. These characteristics would suggest more secure attachment patterns (Collins & Read 1990), rather than the preoccupied-dismissive described by Rothbaum et al (2002), which is characterised by the kind of distance present in the away group. The more secure attachment styles would imply higher levels of independence, but accompanied by confidence in the relationship with their partner, which appears to be the case. However, it is becoming widely accepted that attachment styles are amenable to change through new relationship experience (Davila 2001; Waters et al 2000). That being so, given that the average length of marriage in these families is around fifteen years in both groups, and there was only one under five years, it is possible that the attachment styles evident at the point of measurement is as much a function of the marriage style than an indication of what brought the couple together and created the home or away style of family. Furthermore, these are the couples who have survived the work related separation and have been able to manage their lives accordingly; the ability to reach fifteen years may be more about flexibility which is characteristic of secure attachment (Diehl et al 1998) so perhaps those who come together with the preoccupied-detached pattern do not survive this long.

However the family's situation arose, increased income appears to be a function of father's absence and it is this money which allows them to function as well as the home group. Yet in most cases the decision to work away from home was made very early on in married life and perhaps even before the birth of any children, with the financial pressures that brings.

The data suggests that both partners are relatively happy with the arrangement and what is more, the arrangement appears to be relatively successful. One may speculate that there was willingness or even drive to set up system initially to maximize income at the expense of proximity, based on the beliefs and needs of the individuals.

Overall contrary to the initial hypotheses, the families where men worked away appeared to function as well, and sometimes better, than those where fathers did not spend considerable amounts of time away because of their employment. Despite periods of reduced support and the absence of the buffering effect of the presence of a partner, women in the away group are able to maintain the functioning of the family at a level similar to the two parent households and the children appear no more distressed. These women appear then to have a higher level of self efficacy and the family appears to function fairly independently of father. Both partners in the away group also reported being more comfortable depending on others than those in the home group. Far from being two similar groups of families who are managing different situations, the two groups appear to be functioning at similar levels yet with different systems of functioning. Fathers in the away group appear to be less integrated into family functioning and have more 'traditional' views of their family role, while the mothers in this group appear to be more independent. It would appear that the away families have found systems which work for them.

As suggested earlier, much of this study was exploratory in nature and this had the potential of reducing the power of the statistical analysis. However, many of the measures used served to confirm that there was in fact no differences between the levels of functioning of the two groups. Indeed all three null hypotheses were supported. However

within the data there appeared to be a consistent theme which pointed to differing ways of achieving the similar ends. Indeed many of the areas of difference mentioned above achieved significance even at the highly stringent “familywise” level suggesting very strong differences in how these similar levels of functioning are achieved in the two groups of families.

4.1 Limitations of the study

There are however a number of methodological issues which suggest some care must be taken in generalising these findings. In terms of design, the current research was a cross sectional study which, while giving a good picture of family functioning at any one time, fails to take into account the fluid dynamics of the family. As Carr (2001a) points out, the family system does change across time and circumstance as the unit negotiates its tasks and individuals develop. Any data produced at a given point may be relevant under a certain set of circumstances or stressors, but may fail to represent the functioning of the family over longer periods of time.

The subject selection process was also a possible source of bias. Families were selected by clinicians from their current caseloads. There is considerable likelihood that clinicians selected families which they felt were most appropriate in a number of ways. The clinicians were colleagues of the researcher and were keen to ensure good responses from participants. They are likely to have chosen families whom they felt would be most likely to participate in the study. Furthermore as was indicated by a number of the clinicians there were families on their caseloads which the clinicians felt, despite fitting the criteria, were currently too distressed to participate. Alongside the clinicians’ subject selection, there was a further level of self selection as a number of families chose to opt out of

returning some or all of the questionnaires. In particular, a number of fathers refused to return any data what so ever.

This may have been related to the nature of the questions being asked. The questionnaires used centred around family, marriage and parenting, all of which often come under threat in families experiencing the levels of stress which lead them to seek referral to child and adolescent mental health services. The process of completing questionnaires which ask parents to make judgments about these may have been too difficult for some families. Indeed two families said that they were not willing to complete the questionnaires but would be happy to talk about it face to face with the researcher, suggesting there was either something difficult about the questionnaires themselves or about committing answers to paper. As Grimm-Thomas & Perry-Jenkins (1994) suggest those families which did return the questionnaire are likely to be those who consider their functioning to be relatively normal. It is likely therefore, that the remaining families did not represent the entire spectrum of family functioning or marital relationships. Furthermore, the various selection processes described led to data being gathered only a small sample of families in both groups which also has the potential for creating bias in the results. It would be useful therefore to recruit over a longer period of time and perhaps include all new referrals over the period rather than ask clinicians to select appropriate families.

The method of data collection was entirely self-report. While this gives an important insight into individual perceptions and beliefs, it is difficult to know how these perceptions reflect actual functioning. Indeed this problem resonates with some of the difficulties facing therapists dealing with families and in particular families where only one parent attends. In many of the families who completed questionnaires there were significant

differences of opinion about family function between partners, so clearly there is some disparity between perception and reality since both partners cannot have accurate views which are so different. Within the clinic setting, the therapist overcomes this distinction when they observe how the family interact together and can then match this up to the reports of the individuals. It would be useful therefore in any future replication of this study to include some objective measure of family function which would afford an actual comparison of functioning as well as helping understand how individual perspectives relate to this functioning.

Finally there are a number of factors about which data was not recorded but which may have been important. There were no measures of social support included in the data collection. This may have been particularly significant in the case of the away families, where despite the absence of one parent, family functioning appeared no worse than in the home family. No account was taken for the wider support of friends or family and whether it had any impact on the families. It would also have been useful to collect data on father's levels of interaction with the children

4.2 Clinical implications

Given the literature on father absence in the divorced population, it would be relatively easy to proceed with certain assumptions when faced in the therapy room with families in which father is consistently absent. One could easily be led to the conclusion that current difficulties in the homes of the away families are being contributed to by father's absence. The absence may be considered, as the literature suggests, a reduction in support which places additional pressures on mother causing increased disruption. However it is clear from the findings that in some families, that is not the case. In fact father's absence may

be a way of meeting the greatest number of the families needs in a positive way. The absence may well be boosting fathers self esteem, affording mother autonomy and resources with which to provide support for the children. When facing such families in therapy, it would be important to consider and discuss the purpose and function of the absence for the family and to give due consideration to the possible advantages for all including mother.

On a more general level, the findings question the western cultural assumption that intact nuclear families that co-habit are the ideal. There are a group of families who have a very different structure and yet manage to function at a level similar to a matched group who do fit the cultural norm. This highlights that structures are a function of many factors including individual needs, resources and context, and how these are balanced will determine the success of the structure rather than whether families are a certain shape. If this is true for this group, then perhaps families with other alternative structures are also able to function relatively well and perhaps even because of rather than despite their structure.

4.3 Future direction

There are a number of areas in which these findings could be developed in future research. Firstly it would be useful to compare the away group with non-clinical samples of families where father is away through work commitment and where father is not away. The families sampled were all experiencing some struggle which led to their referral. It may be that the unexpected utility of father's absence is related to the high levels of distress and difficulty present in these families and in other less difficult circumstances the benefits are absent.

While the current study measured family function, there was no measure of how father or mother participated in the family function. In order to develop a clearer sense of how the absence interacts with the processes of the family it would be useful to gather data about father's activities when at home. In particular, partners in both groups reported similar levels of satisfaction with the amount of joint activity; however it was not clear whether this meant they had similar levels of activity or satisfaction with the activity. It would be useful to develop an understanding therefore of the level of participation of father in those periods when he was available to participate.

This would be further complimented by some measure of partners' beliefs about the roles they have in the family. Role Identity Theory (Pasley et al 2002) would suggest that consensus on these roles is what would allow the family to function well. The current study did highlight that roles are more defined in the away group and there appeared to be some differences in the perception of roles between the two groups such that the away group appeared to see their role as breadwinner as particularly significant, however it did not measure or attempt to describe what those roles might be.

Finally in order to develop a greater understanding of the experience of the members of these families, rather than how the family functions, a more qualitative approach would help to highlight possible sources of distress for both partners which are lost in a quantitative approach. This would allow therapists to identify and explore significant risk areas on an individual rather than systemic level.

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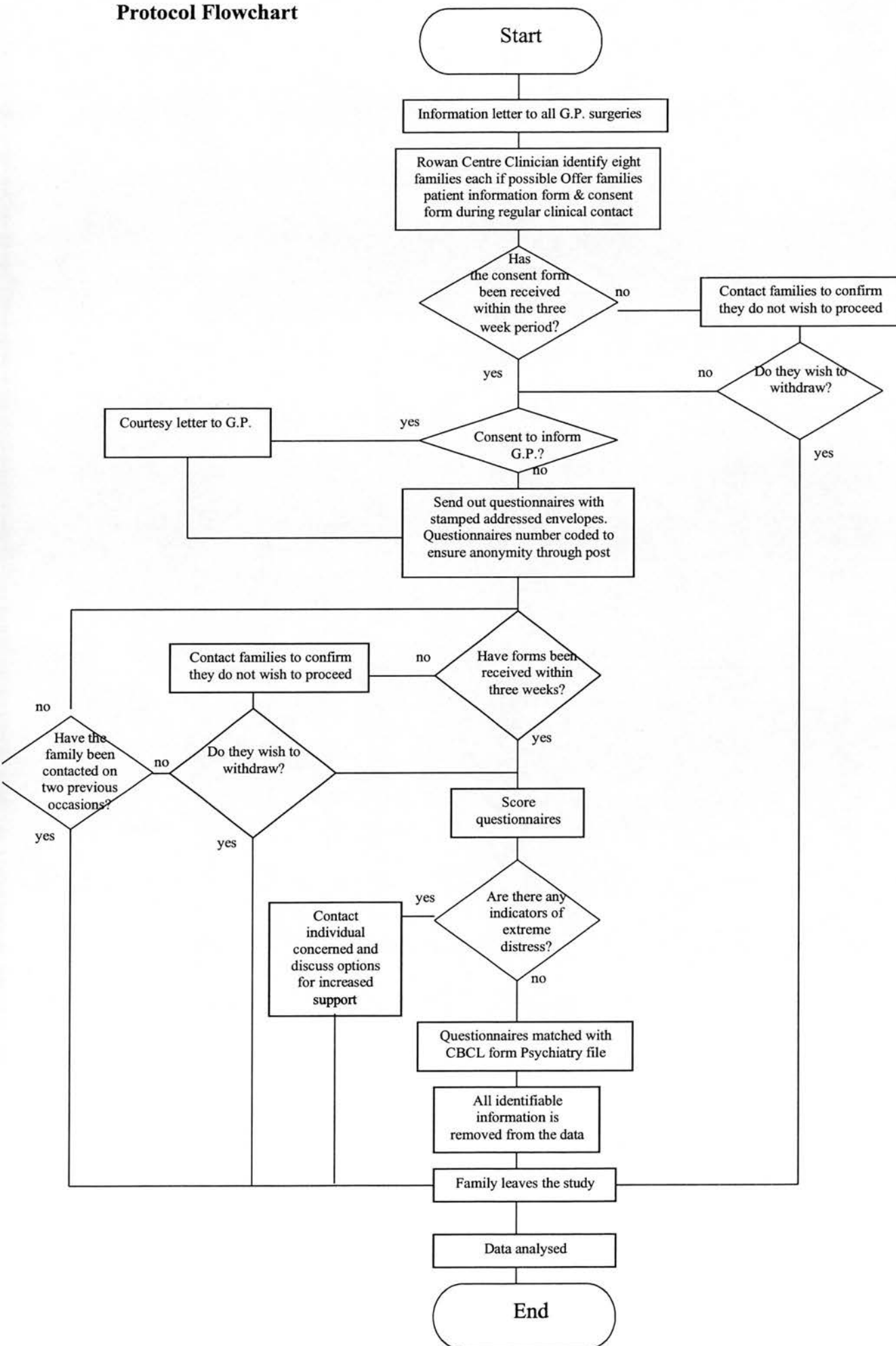
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Appendix I

Protocol Flowchart



Appendix II

Grampian Primary Care NHS Trust

*The Rowan Centre
Mental Health Services for Children and Adolescents
Maryhill
High Street
ELGIN
IV30 1AT
Tel: (Direct Line) 01343 567399
Fax: 01343 567699*

Centre Number: :

Study Number:

CONSENT FORM

Title of Project: What effect, if any, does being away from home because of your job have on the way your family functions?

Name of Researcher: Gavin Richardson (Trainee Clinical Psychologist)

Please initial b

1. I confirm that I have read and understand the information sheet dated
(version) for the above study and have had the opportunity to ask questions.

☐

2. I understand that my participation is voluntary and that I am free to withdraw at any time,
without giving any reason, without my medical care or legal rights being affected.

☐

3. I understand that sections of any of my medical notes may be looked at by responsible
individuals or from regulatory authorities where it is relevant to my taking part in research.
I give permission for these individuals to have access to my records.

☐

4. I agree my G.P. being informed of my participation in this study.

☐

5. I agree to take part in the above study.

☐

Name of Patient

Date Signature

Name of Person taking consent
(if different from researcher)

Date

Signature

Researcher

Signature

Date

1 for patient; 1 for researcher; 1 to be kept with hospital notes

Appendix III

Grampian Primary Care NHS Trust

*The Rowan Centre
Mental Health Services for Children and Adolescents
Maryhill
High Street
ELGIN
IV30 1AT
Tel: (Direct Line) 01343 567399
Fax: 01343 567699*

Patient Information Form

What is the title of the Research Study?

What effect, if any, does being away from home because of your job have on the way your family functions?

You are being invited to take part in a research study. Before you decide it is important for you to read the following information carefully and discuss it with friends, relatives and your G.P. if you wish (information has been sent out to all G.P. practices). If there is anything that is not clear or if you would like further information, do not hesitate to contact me directly on 01343 567399. Take your time to decide whether or not you wish to take part.

What is the purpose of the study?

Parents who work away from home are often unavailable to attend mental health services which tend to operate on a Monday to Friday, 9am-5pm basis. This absence can pose a problem for therapy. In particular, such services often like to consider families as a whole or complete system and to work with the whole unit together. The absence of one individual can make this more difficult. Furthermore, this absence can potentially lead the therapist to a range of assumptions about the family and the way it functions that may be unhelpful or inaccurate.

It would be useful therefore to have more information about how these absences, which are becoming increasingly prevalent, may relate to family function, how it impacts on the family and how the partners feel about this.

Many of the families that we meet cope very well with these temporary absences and it would help in the future if we knew more about a variety of aspects of people's absences and how they feel about it. We will therefore be asking a range of people, from those who are never away through those who are away occasionally to those who have to be away regularly or for considerable periods of time. All will be asked the same questions about how it affects them and the family.

Why have I been chosen?

You have been selected to be invited to participate because you are currently in contact with the Rowan Centre. I also work at the centre and I have asked the other clinicians who

work there to select a range of families, some of whom have a parent that works away and some who do not. We have selected families where both parents live in the home because permanent separation or divorce may have it's own set of difficulties. We have selected families who's children have been referred to the Rowan Centre because any information we find would be useful in considering other children and families in similar situations to help guide therapy.

I would hope to include 50-60 families in the study in order to obtain a broad range of experiences.

Do I have to take part?

Absolutely not. It is up to you to decide whether to take part or not. If you do decide to take part you will be given this information sheet to keep and a consent form which you will be asked to sign. If you decide to take part in the study, you are free to withdraw at any point without giving a reason.

Deciding not to take part or withdrawing after starting **will not affect the standard of care you receive**. In fact once the clinician has given you this letter, they will receive no further information about your participation in the study unless there are special circumstances.

What will happen if I take part?

Although I will be collecting information for a period of about four months from different families, each family will only be involved for as long as it takes to complete a set of forms (around 40 minutes). Should you agree to participate, these forms will be sent out to you (one set for each partner) along with a stamped addressed envelope and you will be asked to complete them. Each set of forms will have a code number on it rather than your name so that when you return the forms, should they go missing in the post no-one will be able to identify you as the person who completed them. This will be the end of your participation.

You will **not** be required to make any additional visits to the Rowan Centre or any other health professional nor will anyone visit you unless you request it. There are two points in the process when the researcher may contact you. If we do not receive your consent form within three weeks of you receiving this information form, I will contact you to confirm that you do not want to be included in the study. The second point at which you may be contacted would be if the consent form were received and the questionnaires sent out but not returned within a period of three weeks. I would contact you to confirm that you had decided to withdraw after receiving the questionnaires. Neither of these telephone calls would involve persuasion or coercion, they would simply be courtesy calls to ensure paperwork had not gone missing in the post.

What will I have to do?

Both partners will be asked to complete a set of questionnaires, which will take around 40 minutes. The questionnaire will ask a range of questions about how your family relate to each other, how you feel about each other and how you cope, as well as some details about any occupational related absence. Once completed you will be asked to return them to me in the stamped addressed envelopes provided.

What is the drug/procedure being tested?

There is no procedure being tested directly, we are simply trying to improve our knowledge about how families experience job related absence and how it impacts on the way families function.

What are the alternatives for diagnosis or treatment?

No treatment or diagnosis is being offered in the course of this study.

What are the side effects of the treatment?

No treatment or diagnosis is being offered in the course of this study.

What are the possible disadvantages of taking part in this study?

There is a range of subjects covered in the questionnaires. While the questions are not designed to be difficult or upsetting, sometimes when we turn our attention to such things as relationships or the family, strong emotions can follow. It may be that in answering these questions there is occasional upset. If this is the case and you feel you would like additional support, then do not hesitate to contact me and I will make arrangements either with you clinician or, if you would prefer, an alternative clinician in the Rowan Centre

In the unlikely event that the returned forms show that the individual who completed is suffering extreme levels of stress, or they or any other individual is in any danger, this will be another special circumstance and I will be obliged to pass this information on to the relevant clinician in order that this can be addressed as quickly as possible.

What are the possible benefits of taking part?

Since we are not offering any treatment or procedure, there will be no direct benefits to you. However we do hope that the information we gain from the study may help our understanding of the way families' function in these circumstances and be of benefit in the treatment of families with similar difficulties in the future.

What if new information becomes available?

Since there is no procedure or drug under investigation, it is unlikely that new information will become available.

What if something goes wrong?

There are broadly two circumstances under which something could go wrong.

- i) If after deciding to participate you find that you are unhappy about the way you have been dealt with by someone connected to the study or with the way it has been conducted. If this should be the case then you should complain immediately in writing addressing your complaint to
- ii) If you find that completing the forms has caused you distress and you would like additional support, then these are one of the *special circumstances* mentioned earlier. If you contact me and let me know, I will pass this information on to the clinician you have been seeing or if you would prefer a different clinician in order that they may offer the appropriate support.

If you are harmed by taking part in this research project, there are no special compensation arrangements. If you are harmed due to someone's negligence, then you may have grounds for legal action but you may have to pay for it. Regardless of this, if you wish to complain

about any aspect of the way you have been approached or treated during the course of this study, the normal National Health Service complaints mechanism may be available.

Will my taking part in this study be kept confidential?

All information which is collected about you during the course of the research will be kept strictly confidential. Any information about you which leaves the Rowan Centre will have your name and address removed so that you cannot be recognised from it.

It would be useful for me to be able to view some sections of the notes held at the Rowan Centre, in particular the questionnaire you returned when you first were in contact, however in order to do this I would require your signature on the attached consent form. Once again any information will be stripped of identifiable details, maintaining your confidentiality.

What will happen to the results of the study?

The results of this research will form part of my research portfolio, which in turn forms a part of my continuing educational requirement. This portfolio will then be held in bound copy at the University of Edinburgh library. When the information reaches this stage, it will contain only summary data (i.e. information about groups rather than individuals) therefore individuals will not be identifiable. There are no plans to publish this study further, however should you wish to obtain a copy of the research, this will be available from me through The Rowan Centre, Maryhill, Elgin.

Who is organising and funding the research?

Since this research forms a part of a higher education qualification, the study will be funded by Edinburgh University. I am jointly employed by the University and NHS Lothian, although seconded to Grampian region, therefore the NHS also has a role in supporting me in this research. It is important to point out once again however, that not taking part or subsequent withdrawal **will not affect your subsequent healthcare provision.**

Who has reviewed the study?

The details of this study have been examined and approved by the Grampian Research Ethics committee

Contact for further information

You can contact me directly:

Gavin Richardson
The Rowan Centre
Maryhill
Elgin

Or you can contact either of my supervisors

<i>Dr Chris Wiles</i>	<i>Mr Ken Laidlaw</i>
The Rowan Centre	Fourth Floor
Maryhill	Kennedy Tower
Elgin	Royal Edinburgh Hospital
	Morningside Rd
	Morningside
	Edinburgh

I would like to take this final opportunity to thank you for taking the time to read this leaflet and consider volunteering for this study. There are many reasons why someone would chose not to participate and should this be your choice then thank you for the time you have given. If you have chosen to participate, then once again thank you for your help.

Appendix IV

Grampian Primary Care NHS Trust

***The Rowan Centre
Mental Health Services for Children and Adolescents
Maryhill
High Street
ELGIN
IV30 1AT
Tel: (Direct Line) 01343 567399
Fax: 01343 567699***

Gavin Richardson
Tel: 01343 567399
e-mail: g_j_richardson@hotmail.com
Date

*Doctor G.P.
The Surgery
Town
Postcode*

Dear Doctor G.P.,

r.e. Mr/Mrs Participant (01/01/60) address, Town, Postcode

I am writing to inform you that the above mentioned patient has been agreed to participate in a questionnaire based research study. They were identified as potential participants through their contact with the Rowan Centre Child and Adolescent Mental Health Service.

You may recall, I circulated a protocol for this study some time ago but in summary, this study is looking at the effects of having to be away from home, through work commitments, for regular or extended periods of time on family functioning. A set of questionnaires will also be sent to the patient's spouse. The questionnaires will ask about various aspects of family functioning and the absence. They will take between thirty and forty minutes to complete and the patient will not be asked to visit the Rowan Centre, nor will they be visited unless they request.

If you have any further questions, do not hesitate to contact me,

Yours sincerely

Gavin Richardson
(Trainee Clinical Psychologist)

Appendix V

Grampian Primary Care NHS Trust

*The Rowan Centre
Mental Health Services for Children and Adolescents
Maryhill
High Street
ELGIN
IV30 1AT
Tel: (Direct Line) 01343 567399
Fax: 01343 567699*

Gavin Richardson
Tel: 01343 567399
e-mail: g_j_richardson@hotmail.com

Date

Mr Participant
His address
Town
Postcode

Dear Mr/Mrs Participant,

Thank you once again for agreeing to participate in this research study. I have enclosed in this letter some questionnaires which I would like you to fill in for me. It should take between half an hour and forty minutes of your time and covers a range of areas of family functioning.

I have also sent a similar pack to your wife/husband and each has with it a stamped addressed envelope. Once completed simply place the questionnaires in the envelope and return them to me here at the Rowan Centre. As you will see, your name, address or date of birth do not appear anywhere on the forms and you will not be asked for any such information on any of the questionnaires. This is to ensure that the forms cannot be attributed to you should they go missing in the post. Instead there is a reference number and I have a list of these numbers and the corresponding names here at the Rowan Centre to match them up when they are returned.

Thank you once again for your time and help with this project and should you require any further information or a copy of the final report, please do not hesitate to contact me,

Yours sincerely

Gavin Richardson
(Trainee Clinical Psychologist)

Thank you once again for completing these questionnaires. In the space above you will find a code number. This will be used to match your forms up with other details when they are returned to the office.

Before you begin, I would like to ask some questions about the family, although none are of the type that would allow you to be identified.

1. Your employment status

- Employed full time
- Employed part time
- Self employed
- Unemployed, looking for work
- Retired
- Permanently unable to work
- Student
- Conduct household duties

2. Does your employment mean you have to stay away from home on occasions? Yes/No

If Yes , a) How often weekly / fortnightly / monthly / every couple of months / yearly

b) Is this predictable / unpredictable

If unpredictable how much notice do you get? _____

c) Regular / irregular

d) For how long at a time _____ is it consistent / does it vary

e) how long ago did they begin to work away from home? _____

3. How stressful do you find you job? (place an X on the line where you think appropriate for your stress level)

Not at all stressful | _____ | unbearably stressful

4. Your partner's employment

- Employed full time
- Employed part time
- Self employed
- Unemployed, looking for work
- Retired
- Permanently unable to work
- Student
- Conduct household duties

5. Does your partner's employment mean they have to stay away from home on occasions?
Yes/No

If Yes , a) How often weekly / fortnightly / monthly / every couple of months / yearly

b) Is this predictable / unpredictable

If unpredictable how much notice do they get? _____

c) Regular / irregular

d) For how long at a time _____ is it consistent / does it vary

e) how long ago did they begin to work away from home? _____

6. How stressful do you find your job? (place an X on the line where you think appropriate for your stress level)

Not at all stressful |—————| unbearably stressful

7. Your highest education level achieved

- Primary school
- High school
- Trade or technical certificate
- College diploma or degree
- University degree
- Other : please specify _____

8. Your partner's highest education level achieved

- Primary school
- High school
- Trade or technical certificate
- College diploma or degree
- University degree
- Other : please specify _____

7. Your household income band

- £0 - £10,000
- £10,001 - £20,000
- £20,001 - £35,000
- £35,001 - £50,000
- £50,001 - £70,000
- £75,001 +

8. How long have you and your partner lived together? _____ years

Thank you for that information and now I wonder if you would turn the page and begin to complete the questionnaire pack. There are several questionnaires and each has its own set of instructions. I hope the time this takes does not inconvenience you too much and thank you again for your help. Should you have any questions do not hesitate to contact me directly.

The Family Assessment Device

Below you will find a series of statements about your family. Please indicate how much you agree or disagree with each by circling either Strongly Disagree, Disagree, Agree or Strongly Agree, e.g.

We do not do enough together as a family	Strongly Disagree	Disagree	Agree	Strongly Agree
--	-------------------	----------	-------	----------------

Family tasks don't get spread around enough	Strongly Disagree	Disagree	Agree	Strongly Agree
After our family tries to solve a problem, we usually discuss whether it worked or not	Strongly Disagree	Disagree	Agree	Strongly Agree
People come right out and say things instead of hinting at them	Strongly Disagree	Disagree	Agree	Strongly Agree
You only get the interest of others when something is important to them	Strongly Disagree	Disagree	Agree	Strongly Agree
We feel accepted for what we are	Strongly Disagree	Disagree	Agree	Strongly Agree
We have trouble meeting our bills	Strongly Disagree	Disagree	Agree	Strongly Agree
We are reluctant to show our affection for each other	Strongly Disagree	Disagree	Agree	Strongly Agree
We are frank with each other	Strongly Disagree	Disagree	Agree	Strongly Agree
There's little time to explore personal interests	Strongly Disagree	Disagree	Agree	Strongly Agree
Making decisions is a problem for our family	Strongly Disagree	Disagree	Agree	Strongly Agree
Some of us just don't respond emotionally	Strongly Disagree	Disagree	Agree	Strongly Agree
We resolve most emotional upsets that come up	Strongly Disagree	Disagree	Agree	Strongly Agree
We can express feelings to each other	Strongly Disagree	Disagree	Agree	Strongly Agree
We discuss who is to do household chores	Strongly Disagree	Disagree	Agree	Strongly Agree
We are too self-centred	Strongly Disagree	Disagree	Agree	Strongly Agree
We do not show our love for each other	Strongly Disagree	Disagree	Agree	Strongly Agree
Individuals are accepted for what they are	Strongly Disagree	Disagree	Agree	Strongly Agree
We don't hold to any rules or standards	Strongly Disagree	Disagree	Agree	Strongly Agree
Tenderness takes second place to other things in our family	Strongly Disagree	Disagree	Agree	Strongly Agree
If the rules are broken, we don't know what to expect	Strongly Disagree	Disagree	Agree	Strongly Agree
There are lots of bad feelings in the family	Strongly Disagree	Disagree	Agree	Strongly Agree
We get involved with each other only when something interests us	Strongly Disagree	Disagree	Agree	Strongly Agree
There are rules about dangerous situations	Strongly Disagree	Disagree	Agree	Strongly Agree
We cannot talk to each other about the sadness we feel	Strongly Disagree	Disagree	Agree	Strongly Agree
We show interest in each other only when we can get something out of it personally	Strongly Disagree	Disagree	Agree	Strongly Agree
Anything goes in our family	Strongly Disagree	Disagree	Agree	Strongly Agree

We usually act on our decisions regarding problems	Strongly Disagree	Disagree	Agree	Strongly Agree
You can't tell how a person is feeling from what they are saying	Strongly Disagree	Disagree	Agree	Strongly Agree
When we don't like what someone has done, we tell them	Strongly Disagree	Disagree	Agree	Strongly Agree
When you ask someone to do something, you have to check that they did it	Strongly Disagree	Disagree	Agree	Strongly Agree
We cry openly	Strongly Disagree	Disagree	Agree	Strongly Agree
If someone is in trouble, the others become too involved	Strongly Disagree	Disagree	Agree	Strongly Agree
You can easily get away with breaking the rules	Strongly Disagree	Disagree	Agree	Strongly Agree
Planning family activities is difficult because we misunderstand each other	Strongly Disagree	Disagree	Agree	Strongly Agree
In time of crisis we can turn to each other for support	Strongly Disagree	Disagree	Agree	Strongly Agree
We make sure members meet their family responsibilities	Strongly Disagree	Disagree	Agree	Strongly Agree
We try to think of different ways to solve problems	Strongly Disagree	Disagree	Agree	Strongly Agree
When someone is upset, the others know why	Strongly Disagree	Disagree	Agree	Strongly Agree
Even though they mean well, we intrude too much into each other's lives	Strongly Disagree	Disagree	Agree	Strongly Agree
We don't know what to do when an emergency comes up	Strongly Disagree	Disagree	Agree	Strongly Agree
We confide in each other	Strongly Disagree	Disagree	Agree	Strongly Agree
We know what to do in an emergency	Strongly Disagree	Disagree	Agree	Strongly Agree
We express tenderness	Strongly Disagree	Disagree	Agree	Strongly Agree
We confront problems involving feelings	Strongly Disagree	Disagree	Agree	Strongly Agree
If people are asked to do something, they need reminding	Strongly Disagree	Disagree	Agree	Strongly Agree
We don't talk to each other when we are angry	Strongly Disagree	Disagree	Agree	Strongly Agree
Our family shows interest in each other only when they can get something out of it	Strongly Disagree	Disagree	Agree	Strongly Agree
We are able to make decisions about how to solve problems	Strongly Disagree	Disagree	Agree	Strongly Agree
We don't get along well together	Strongly Disagree	Disagree	Agree	Strongly Agree
We have no clear expectations about toilet habits	Strongly Disagree	Disagree	Agree	Strongly Agree
We are generally dissatisfied with the family duties assigned to us	Strongly Disagree	Disagree	Agree	Strongly Agree
We avoid discussing our fears and concerns	Strongly Disagree	Disagree	Agree	Strongly Agree
We have rules about hitting people	Strongly Disagree	Disagree	Agree	Strongly Agree

The Adult Attachment Scale

Below you will find a number of statements about yourself. Please indicate how much this statement describes you by placing an **X** on the line, somewhere between the end labelled not at all characteristic and the end labelled very characteristic, e.g.

I find I want to get too close to others	Not at all characteristic -----+-----+----- X -----+----- very characteristic
I want to merge completely with another person	Not at all characteristic -----+-----+-----+----- very characteristic
I find it relatively easy to get close to others	Not at all characteristic -----+-----+-----+----- very characteristic
I find it difficult to trust others completely	Not at all characteristic -----+-----+-----+----- very characteristic
I am nervous when anyone gets too close	Not at all characteristic -----+-----+-----+----- very characteristic
I find it difficult to allow myself to depend on others	Not at all characteristic -----+-----+-----+----- very characteristic
I find others are reluctant to get as close as I would like to	Not at all characteristic -----+-----+-----+----- very characteristic
I know that others will be there when I need them	Not at all characteristic -----+-----+-----+----- very characteristic
I often worry that my partner does not really love me	Not at all characteristic -----+-----+-----+----- very characteristic
I am not sure that I can always depend on others to be there when I need them	Not at all characteristic -----+-----+-----+----- very characteristic
Often, love partners want me to be more intimate than I feel comfortable being	Not at all characteristic -----+-----+-----+----- very characteristic
I do not often worry about someone getting too close to me	Not at all characteristic -----+-----+-----+----- very characteristic
I often worry my partner will not stay with me	Not at all characteristic -----+-----+-----+----- very characteristic
I do not often worry about being abandoned	Not at all characteristic -----+-----+-----+----- very characteristic
I am comfortable having others depend on me	Not at all characteristic -----+-----+-----+----- very characteristic
People are never there when you need them	Not at all characteristic -----+-----+-----+----- very characteristic
My desire to merge sometimes scares people away	Not at all characteristic -----+-----+-----+----- very characteristic
I am comfortable depending on others	Not at all characteristic -----+-----+-----+----- very characteristic
I am somewhat uncomfortable being close to others	Not at all characteristic -----+-----+-----+----- very characteristic

Most people have disagreements in their relationships. Please indicate the approximate extent of agreement or disagreement between you and your partner for each item on the following list:

	All the time	Most of the time	More often than not	Occasionally	Rarely	never
How often do you discuss or have you considered divorce, separation or termination of your relationship?						
How often do you or your mate leave the house after a fight?						
In general, how often do you think that things between you and your partner are going well?						
Do you confide in your mate?						
Do you ever regret that you married (or co-habit)?						
How often do you and your partner quarrel?						
How often do you and your mate "get on each others nerves"?						

Every day Almost every day Occasionally Rarely never

All of them	Most of them	Once or twice a week	Once a day	More often
1	2	3	4	5

How often do the following events occur between you and your mate?

	Never	Less than once a month	Once or twice a month	Once or twice a week	Once a day	More often
Have a stimulating exchange of ideas						
Laugh together						
Calmly discuss something						
Work together on a project						

These are some things about which couples sometimes disagree. Indicate if either item below caused differences of opinion or were problems in your relationship in the last few weeks (mark yes or no)

Being too tired for sex Yes No
 Not showing love yes No

The range below represents different degrees of happiness in your relationship. The middle point, "happy", represents the degree of happiness of most relationships. Please circle the term which best describes the degree of happiness, all things considered, of your relationship.

Extremely Unhappy Fairly Unhappy A Little Unhappy Happy Very happy Extremely happy Perfect

Which of the following statements best describes how you feel about the future of your relationship? (mark with an 'X')

	I want desperately for my relationship to succeed, and <i>would go to almost any length</i> to see that it does
	I want very much for my relationship to succeed, and <i>will do all I can</i> to see that it does
	I want very much for my relationship to succeed, and <i>will do my fair share</i> to see that it does
	It would be nice if my relationship succeeded, but <i>I can't do much more than I'm doing</i> now to help it succeed
	It would be nice if it succeeded, but I <i>refuse to do any more than I am doing</i> now to keep the relationship going
	My relationship can never succeed, and <i>there is no more that I can do</i> to keep the relationship going

The Parenting Behaviour Inventory

Please read each statement carefully. Think about how you and your child **generally** get on. Tell us how well each statement describes the way you **usually** act with your child

Use this rating guide to describe how well each statement describes you:

0 not at all true (I do not do this)

1 a little true

2 somewhat true

3 moderately true

4 quite a bit true

5 very true (I often do this)

- | | | |
|----|---|--|
| 1 | I Lose my temper when my child doesn't do something I asked him/her to do | |
| 2 | I have pleasant conversations with my child | |
| 3 | I grab or handle my child roughly | |
| 4 | I try to teach my child new things | |
| 5 | I demand that my child does something (or stops doing something) right away | |
| 6 | My child and I hug and/or kiss each other | |
| 7 | I complain about my child's behaviour or tell them I don't like what they are doing | |
| 8 | I laugh with my child about things we find funny | |
| 9 | When my child misbehaves, I let him know what will happen if s/he doesn't behave | |
| 10 | My child and I spend time playing games doing crafts or doing other activities together | |
| 11 | I listen to my child's feelings and try to understand them | |
| 12 | I thank or praise my child | |
| 13 | I spank or use physical punishment with my child | |
| 14 | I offer to help or help my child with things s/he is doing | |
| 15 | I threaten my child | |
| 16 | I comfort my child when s/he seems scared, upset or unsure | |
| 17 | I say mean things to my child that could make him/her feel bad | |
| 18 | I hold or touch my child in an affectionate way | |
| 19 | When I am disappointed in my child's behaviour, I remind them about how much I've done for them | |
| 20 | When my child asks for help or attention, I ignore him/her or make him/her wait | |

Rating